



*Office of  
Student Life*

# PRE-EVENT PLANNING FORM

Pre-event planning forms, and any necessary accompanying forms, must be completed and returned to the Office of Student Life at least one week prior to the date of the event. All events must be approved by the Office of Student Life.

Name of Organization: \_\_\_\_\_

Individual(s) responsible for coordinating event:

\_\_\_\_\_  
Name email

Title of event/activity: \_\_\_\_\_

Type of event:

\_\_\_\_ Fundraiser    \_\_\_\_ Conference/Seminar    \_\_\_\_ Program  
\_\_\_\_ Retreat    \_\_\_\_ Social Activity    \_\_\_\_ Other

Date(s) of event: \_\_\_\_\_



Make sure that you have consulted the University calendar to insure the date is available or is the optimal time for hosting the event

Location: \_\_\_\_\_



Make sure you have reserved the facility.

Backup location in case of bad weather: \_\_\_\_\_

Start time: \_\_\_\_\_ End time: \_\_\_\_\_

Other departments/organizations involved: \_\_\_\_\_

Estimate the number of people attending:

How does this event promote the mission and purpose of your organization?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Introduction:

The key to a successful event is good pre-planning. This resource provides your organization with a series of questions to consider prior to engaging in an activity. This is a great tool for students and advisors to use together. We recommend that all the leaders of your organization participate in the planning process. That way, your entire group is on board and understands your direction. Please keep in mind that all activities should be consistent with University Rules, policies, and procedures as well as the mission/purpose of your organization.

1. Provide a brief description of the event/activity that you are planning:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Fill out the worksheet below to demonstrate you approach to managing risks:



8. Does your program involve physical activity? \_\_\_\_\_ Yes \_\_\_\_\_ No



Plan ahead for medical emergencies and have a plan in place.

9. Are you contracting a service from a non-university entity?

\_\_\_\_\_ Yes \_\_\_\_\_ No



Come see Todd Sutherland or Shelly Fordyce in the Office of Student Life.

10. Have you reviewed your budget and purchasing guidelines as it relates to this event/activity? \_\_\_\_\_ Yes \_\_\_\_\_ No

11. Will your event require University Police for security and/or parking control?

\_\_\_\_\_ Yes \_\_\_\_\_ No



For assistance, contact the University Police Department at 740-4545.

12. Are you using an assumption of risk, medical release, or emergency contact form? \_\_\_\_\_ Yes \_\_\_\_\_ No



For assistance, you can contact the Office of Student Life at 740-4427

13. Are you planning on posting flyers or advertising on campus?

\_\_\_\_\_ Yes \_\_\_\_\_ No



Don't forget to have your flyers approved by the Office of Student Life.

Our organization completed this checklist on \_\_\_\_\_ (date).

\_\_\_\_\_  
Signature of Organization Officer

\_\_\_\_\_  
Signature of Organization Advisor

**Make sure that you organization fills out an After-action report at the completion of this activity.**

For office use only:

Date Pre-event form received: \_\_\_\_\_

After Action Report received: \_\_\_\_\_

Activity Approved: \_\_\_\_\_

Office of Student Life official

ONCE APPROVED, THIS FORM SHOULD BE KEPT IN THE STUDENT ORGANIZATION'S MAILBOX SO IT IS AVAILABLE TO ANYONE NEEDING TO MAKE A PURCHASE. THIS FORM MUST BE VERIFIED BY STUDENT LIFE PRIOR TO ANY PURCHASE.

Student Organization: \_\_\_\_\_

Event Name: \_\_\_\_\_

Event Date(s) \_\_\_\_\_

Beginning amount in organization account: \_\_\_\_\_

<u>Vendor/Store</u>	<u>Items to purchase</u>	<u>Estimated amt.</u>	<u>Actual Amt.</u>	<u>Officer/Advisor</u> <u>Approval</u> <u>(Initial)</u>

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