

SUNY Delhi Office of Student Activities
Student Organization Event Form

Thank you for your willingness to put on an event with Student Activities. This form is to be used to help your planning process and help ensure the success of the program you wish to host. Please do not hesitate to speak with Student Activities if you have any questions. NOTE: Resident Hall Assistants are to reserve space for program credit through their Resident Hall Directors.

- Write neatly type as illegible forms will be returned. Each section must be completed. Please note this form is double-sided.
- Submit this form to Student Activities AT LEAST **10 business days** prior to the event. Earlier is much better!
- Event marketing/publicity **may not** occur until after this Event Packet has been approved by the Office of Student Activities.
- It is encouraged to consult with Student Activities on event idea and location feasibility/availability prior to submission of Event Form. **Per the Event Policy Guidelines, please note student organization events may not occur after the last day of classes each academic semester.**
- Event location desired subject to availability at the time Student Activities submits room request in EMS to Facilities.
- Notify Student Activities of cancellations by emailing studentactivities@delhi.edu. Rescheduled dates must be approved.
- You will receive a digital copy of this form once it is approved. If there are issues or questions we will contact you.

Sponsoring Organization(s): _____ Event Name: _____

Person Responsible for event: _____ Email: _____@delhi.edu Cell #: _____

Event Description: Provide a detailed description of the event.

Event Room Reservation Section:

Building and Room Number Requested	Date(s)			Event Time		Reservation Time <small>(Includes Set-Up and Take Down)</small>	
	Month	Day	Year	From	To	From	To
Is this an annual event?			Yes	No	Approximate Number of People Expected: _____		
Will there be food/beverages served?			Yes	No	*More than 30 people requires a chaperone.*		

Chaperone Section: This Chaperone Section is required for every event with an expected attendance of more than 30 people. Only staff and faculty employed by SUNY Delhi may be considered a professional chaperone. The chaperone(s) are required to be at the event at all times and exercise professional judgment and control necessary to ensure that student behavior be appropriate and commensurate with the nature of the event. Student Activities reserves the right to require chaperones and/or increase the number of chaperones required based on their judgement on perceived risk and/or need.

Chaperone 1 Name: _____ Chaperone 1 Signature: _____ Date: ____/____/____

Chaperone 1 Office #: _____ Chaperone 1 Cell#: _____ Date: ____/____/____

Chaperone 2 Name: _____ Chaperone 2 Signature: _____ Date: ____/____/____

Chaperone 2 Office #: _____ Chaperone 2 Cell#: _____ Date: ____/____/____

Equipment and Supplies:

Check Box if usual room set up is all that is needed with no additional equipment. If needed, please specify below any additional equipment you are requesting. **Any mark other than a number will be considered "one."** Check box if attaching diagram.

___ Chairs ___ Tables ___ Microphones ___ Laptop ___ iPad ___ Sound System ___ Projector ___ Screen ___ Lighting

Other Equipment Supplies needed: _____

Event Budget: Estimated Budget: \$ _____

Funding Source: (Check all the apply) Student Senate Budget Group's CADI account

Have you/will you be requesting an additional allocation for this event? (circle one) Yes No If yes, how much? \$ _____

Will you be applying for a CADI Mini Grant? (circle one) Yes No Will you be fundraising for this event? (circle one) Yes No
Please provide a description of how the money will be spent (items and approximate cost.)

Contracts/Purchase Orders/Buying Supplies Timeline: Any event requiring a contract with an outside entity must be provided to Student Activities AFTER this Event Form is approved. Contracts must get processed and signed only by the Director of Student Activities. This must be done prior to the submission of a purchase order (PO.) PO's for any checks needed must be submitted no later than noon on the Wednesday before the Friday the week you need a check. PO's for items that need to be purchased online must be submitted with enough advance notice to allow for regular (If applicable and available on Amazon Prime) shipping charges on in-stock items at the time of placing the order. The first time overnight shipping is needed it will be allowed, however, after that, no overnight or one-day shipping charges will be charged to the organization's student senate account. In these cases the group's CADI account funds must be used to pay for the overnight or one-day shipping costs. In other words, please plan ahead. Signing this form below acknowledges agreement to this section.

Marketing Plan: All events through the office of Student Activities must be marketed and open to all members of the Delhi Student Community. Organizations are responsible for marketing and publicizing their events to the best of their ability. Marketing will be discussed with the organization at the Pre-Event Meeting. Signing this form below acknowledges agreement to this section.

Event Application Signatures: By signing below, we indicate that we will take responsibility to ensure that the event, which my organization is sponsoring, will conform with all College policies, all guidelines contained herein and issued by the Office of Student Activities, Student Senate, and in the College's Code of Conduct. We acknowledge and understand that any violation of any policy may subject the participants and/or the organization to disciplinary action by the College.

Applicant's Signature and Date

Organization Advisor Signature and Date

Organization Officer Signature and Date

Additional Signature and Date (if needed – e.g. – facility coordinator, etc.)

BELOW THIS POINT – TO BE COMPLETED BY STUDENT ACTIVITIES

Pre Event Meeting: A pre-event meeting is required at least 1 week prior to the event. *Note most large events may require 2-3 weeks or more for proper planning and Facilities requests.* Please see Student Activities Secretary to turn in this form and to schedule an appointment with a member of the Student Activities Team.

Pre Event Meeting Date: _____ Time: _____ Attach Pre-Event Mtg. Checklist

Meeting is scheduled with: (Circle one) Larry Nick Joli

Pre Event Meeting Certification: (signed by Student Activities Staff) _____ Date: _____

EVENT APPROVAL:

Director of Student Activities: _____ Date: _____