



Student Involvement

CAMPUS EVENTS CHECK LIST

1. Organization Name: _____
2. Name of Event: _____
3. Detailed description of Event: _____

4. Is your organization sponsoring this event for an off-campus organization? Yes No
If yes, list name of organization and what they are providing? _____

5. How are you promoting your event? _____

6. Do you have event flyers/brochures? Yes No If yes, please submit it with this form
7. Expected attendance: _____ Students Off-Campus Visitors
8. Will food be served or given to participants? Yes No
If yes, where is food from? Food Services Potluck Donation
Other: _____
9. Will there be information booths/tables? Yes No
If yes, how many? _____
10. Will there be vendor booths? Yes No
If yes, how many and what will they be selling? _____

- Are you charging the vendors? Yes No
11. Will there be vehicle displays or RV's? Yes No
If yes, how many? _____
12. Will electricity be needed? Yes No
13. Will there be performers or music? Yes No
14. Will there be any large exhibits? Yes No
If yes, please describe: _____

15. Other information about your event: _____

