



**Student Club/Organization
Event Proposal Form**

If event is approved, facilities request form must be submitted.

Club Name: _____

What is the event? _____

Why are you having this event? _____

Target Audience for Event: OCC Students Faculty/Staff General Public

Day & Date of Event: _____ **Location:** _____

Event Time: _____ am/pm **until** _____ am/pm **Set-up Time:** _____ am/pm

Have you submitted a room request (R25 form)? Yes ___ No ___

Would you like this event promoted on social media? Yes ___ No ___

Member in charge of event: _____ **Phone #:** _____

Email: _____

What are your estimated expenses? (for ex. Speaker fees, refreshments, decorations)

Names of Confirmed Volunteers

Set Up: 1 _____ 2 _____

 3 _____ 4 _____

Publicity: 1 _____ 2 _____

 3 _____ 4 _____

Event Staffing: 1 _____ 2 _____

 3 _____ 4 _____

Clean-Up: 1 _____ 2 _____

 3 _____ 4 _____

Are you committed to attending this event?
 Yes No

Are you committed to attending this event?
 Yes No

Club President Signature Date

Club Advisor Signature Date

Assistant Director of Student Life Date