



Event Proposal Form

Student Organization Name: _____ **Date:** _____

Applicant Name: _____ **Email:** _____

Please check the type of activity/event you are planning, based on provided examples...

External Event (off-campus)

- Community Service project
- Movie Night Out
- BBQ or Picnic

Internal Event (on-campus)

- Clean Up Campus campaign
- Take Back the Night march
- Film or speaker presentation

Event Title: _____

Event Date: _____ **Time:** _____ **Location:** _____

Summary of Event: _____

Impact Statement: *How does this event impact COCC students, the campus, a community, or your club/organization's mission?*

Expense Summary: *(Examples: decorations, speaker fees, catering, etc.)*

Estimated total: \$ _____

Pulling from club budget: \$ _____ **Requesting from ASCOCC:** \$ _____

Requested Resources *(Examples: room reservations, printing, advertising, event set-up, vehicle rentals, etc.)*
