

## The Office of Student Life Event Pre-Planning Form

Event Title: \_\_\_\_\_

Event Date: \_\_\_\_\_

<b>Purpose of Event: What is the Goal of the event</b>	<hr/> <hr/> <hr/> <hr/> <hr/>		
<b>Who is our targeted audience:</b>	<input type="checkbox"/> Students <input type="checkbox"/> Campus <input type="checkbox"/> Community		
<b>Type of Students (Each has own needs, how will you address them)</b>	<b>Campus Community</b>	<b>Community At Large</b>	
<input type="checkbox"/> Career Paths  <input type="checkbox"/> New Students <input type="checkbox"/> Existing Students  <input type="checkbox"/> Early College <input type="checkbox"/> PSEO  <input type="checkbox"/> Day Student <input type="checkbox"/> Evening Student  <input type="checkbox"/> Single <input type="checkbox"/> With Family  <input type="checkbox"/> Traditional <input type="checkbox"/> Non-Traditional	<input type="checkbox"/> Faculty <input type="checkbox"/> Staff <input type="checkbox"/> Directors <input type="checkbox"/> Pres/V.P.'s  Notes:	<input type="checkbox"/> Babies <input type="checkbox"/> Toddlers <input type="checkbox"/> Children <input type="checkbox"/> Teens <input type="checkbox"/> Young Adults <input type="checkbox"/> Adults <input type="checkbox"/> Seniors	
<b>Anticipated Attendance</b>	<input type="checkbox"/> <25 <input type="checkbox"/> 25-50 <input type="checkbox"/> 20-100 <input type="checkbox"/> 100-400 <input type="checkbox"/> 400+		
<b>When will we have the event</b>	<input type="checkbox"/> Week Day <input type="checkbox"/> Weekend <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening <input type="checkbox"/> Multiple days		
<b>Where will we have the event</b>	<input type="checkbox"/> Indoors		<input type="checkbox"/> Outdoors
	<input type="checkbox"/> On Campus <input type="checkbox"/> Off Campus		<input type="checkbox"/> On Campus <input type="checkbox"/> Off Campus
	<input type="checkbox"/> Small Room <input type="checkbox"/> Large Room		<input type="checkbox"/> Small Room <input type="checkbox"/> Large Room
<b>What will be going on at the event</b>	<input type="checkbox"/> Food <input type="checkbox"/> Concessions <input type="checkbox"/> Catering <input type="checkbox"/> Other(explain)		<input type="checkbox"/> Entertainment <input type="checkbox"/> Music <input type="checkbox"/> DJ <input type="checkbox"/> Individual <input type="checkbox"/> Speaker <input type="checkbox"/> Group <input type="checkbox"/> Local <input type="checkbox"/> National
<b>How will they hear about it:</b>	<input type="checkbox"/> Flyers <input type="checkbox"/> Banners <input type="checkbox"/> Newspaper <input type="checkbox"/> Web <input type="checkbox"/> Invite <input type="checkbox"/> Word of Mouth <input type="checkbox"/> Other		
<b>How much will this cost:</b>			
Location	\$		
Decorations	\$		
Publicity/Marketing	\$		
Entertainment	\$		
Prizes	\$		
Food	\$		
Miscellaneous	\$		

<b>Where can we get the funds from</b>		<input type="checkbox"/> Our Account <input type="checkbox"/> Joint Venture <input type="checkbox"/> Grants <input type="checkbox"/> Donations <input type="checkbox"/> Other			
<b>Location</b>		<b>Where</b>	<b>Assigned To</b>		<b>Date Due</b>
<b>Decorations</b>		<b>What Kind</b>	<b>Assigned To</b>		<b>Date Due</b>
<b>Publicity/Marketing</b>		<b>What Kind</b>	<b>Assigned To</b>		<b>Date Due</b>
<b>Entertainment</b>		<b>What Kind</b>	<b>Assigned To</b>		<b>Date Due</b>
<b>Prizes</b>		<b>What Kind</b>	<b>Assigned To</b>		<b>Date Due</b>
<b>Volunteers (How Many needed for each job)</b>		Assigned To: _____			Date Due: _____
<input type="checkbox"/> Servers # _____	<input type="checkbox"/> Set Up # _____	<input type="checkbox"/> Tear Down # _____	<input type="checkbox"/> Garbage # _____	<input type="checkbox"/> Tables & Chairs # _____ # _____	<input type="checkbox"/> Greeters # _____
<input type="checkbox"/> Data # _____	<input type="checkbox"/> Photos # _____	<input type="checkbox"/> Host/Hostess for Entertainment # _____		<input type="checkbox"/> Marketing # _____	
<b>Additional Thoughts:</b>					
_____					
_____					
_____					
_____					
_____					
_____					
_____					
_____					
_____					