OU Lancaster Campus & Pickerington Center
Class Project/Campus Event Approval Form

Please submit the completed approval form (including Faculty and Division Coordinator’s signatures) to the Dean’s Office on the Lancaster Campus or the Director’s Office at the Pickerington Center. Approval must be requested and a decision received before proceeding with the project. The form should be submitted at least one month prior to the planned event.

Type of Project (check all that apply):

___ Class/Campus Event  ___ Individual Interviews  ___ Survey

Class Name and Number

Instructor of the Class

Title of Project

Proposed Date(s)

1. Please describe the project/event in approximately 100 to 150 words, including goals and outcomes (if necessary, an additional sheet of paper may be attached to this form).

2. Please list the budget necessary to complete this project/event, including total cost and monetary resources requested from Ohio University Lancaster. Please note: Ohio University policy does not provide for the solicitation of outside funding and/or resources for class projects.

3. List the members on the Project/Event Planning Committee.
   1. ____________________________  4. ____________________________
   2. ____________________________  5. ____________________________
   3. ____________________________  6. ____________________________
4. What is the timeframe for your project/event (list the beginning and ending times/dates, as well as times/dates of individual activities that will be held during the course of the project/event)?

   Begin time: __________________________  End time: __________________________

5. Specify anticipated location (space requested) for your project/event.
   ___ Classroom(s) – # of rooms needed ______
   ___ Conference Room
   ___ Wagner Theatre
   ___ Wilkes Art Gallery
   ___ Gymnasium
   ___ North Lobby
   ___ Outside – specify area ____________________
   ___ Other – specify _________________________

6. List set-up requirements for your project/event. Attach a diagram of location set-up, if necessary.
   ___ Chairs – # of chairs needed ______
   ___ Tables – # of tables needed ______
   ___ Podium

7. List the equipment/support needed for your project/event. This list pertains to equipment and support that will not be provided by individuals in your group.
   ___ Audio Visual Equipment – specify ____________________
   ___ Audio for the Theatre
   ___ Lighting for the Theatre
   ___ LCD Projector
   ___ Laptop Computer
   ___ Microphone(s)
   ___ Tech Support (required for audio and lighting in the Theatre)
   ___ Other – specify ____________________

8. Will you be advertising and/or promoting your project/event? If so, how do you plan to market your project/event?
   ___ Press Release
   ___ Public Service Announcement (radio)
   ___ Email to Campus Community
     ___ Students
     ___ Faculty and Staff
   ___ Paid Advertising
   ___ Brochures
   ___ Posters

Please note: Any advertising of a Campus event must be approved by the Manager of Marketing & Communications, Office of Public Information, 740-654-6711
9. Will you be surveying individuals or organizations (either on campus or in the community)? If yes, please attach a copy of the survey that you will be using and a list of those that will be receiving the survey. Also state when you plan to begin and end the survey.

Yes________ No ________ If yes, date(s) of survey:________________________

10. Will you be promoting or assisting outside organization(s) during this project/event? If so, please list the names of the organizations and contact names and telephone numbers.

Yes ________ No ________ If yes, list organization(s): ______________
________________________________

11. Will you be inviting an outside speaker or organization to participate in your event? Will there be a fee or honorarium paid to the speaker? If yes, state the amount to be paid.

Yes ________ No________

If yes, name of speaker(s): ____________________ ____________________

Honorarium:

Yes ________ No________ If yes, amount of honorarium: $__________

12. Will you be serving food? Yes ________ No ________

If yes, please list the type of food and vendor: ______________________________

Will you be selling food?

Yes ________ No ________ If yes, attach a menu and price list.
Dean’s Cabinet Review of Campus Event Approval Form – Class Project

Suggestions / Comments:

Revised 3/16/2012