



STUDENT ACTIVITIES

408-864-8756

www.deanza.edu/studentactivities

EVENT PLANNING REQUEST FORM

- Request will not be accepted without advisor's approval signature.
Allow at least ten (10) working days prior to event.
Confirmation of request will be placed in the club's/organization's and advisor's mailboxes.

PLEASE PRINT CLEARLY

INFORMATION

1. Club/Organization:

2. Name: Phone: () Cell: ()

E-mail:

3. Advisor: Phone: ()

E-mail:

4. Purpose of Use:

* 5. Will this event be co-sponsored with an off-campus organization? YES NO If yes, complete the Student Activities Co-Sponsorship Form on the back of this document.

* 6. Will this event be advertised off-campus? YES NO If yes, complete # 6 on the Student Activities Co-Sponsorship Form on the back of this document.

* 7. Will money be collected at this event? YES NO If yes, complete the Student Activities Money Collection Form on the back of this document.

8. Estimated Attendance:

9. Date(s) of Use

(List ALL Date(s)):

Alternate Choice(s) for Date(s):

10. Event Schedule: Beginning Time: AM / PM Ending Time: AM / PM

Complete if Necessary

Set-up Time: AM / PM To: AM / PM Clean-up Time: AM / PM To: AM / PM

11. Facility Any Room (write description in the comments section) OR

Alternate Choice(s):

COMMENTS

- Any service requests (i.e. tables, chairs, parking permits, etc.) and facility specifications should be indicated here.
Equipment needs (i.e. TV/VCR, PA System, overhead projector, camera, tent, etc.) should be requested using the Student Activities Office Equipment Checkout Form.

If this request is for anything other than a regular meeting (i.e. dance, performance, speaker, etc.), involves an off-campus organization, involves off-campus advertising, and/or money is being collected you must meet with La Donna Yumori-Kaku, Student Activities Specialist, (408) 864-8692, YumoriKakuLaDonna@deanza.edu, before submitting this form. *

of Tables

of Chairs

of Permits

* Form Reviewed

(Office Use Only) Date Initials

ADVISOR APPROVAL

As advisor, I approve this activity and will advise the members of their obligation to uphold college rules and regulations, and I will be present throughout this event, including set-up and clean-up.

13. Advisor's Signature: Date:

OFFICE USE ONLY

Table with columns: Confirmation/Contract #, Date, Time, Room/Table#, and Approval/Date.

Student Activities Co-Sponsorship Form

1. Off-Campus Organization Name: _____
2. Off-Campus Organization Contact Person: _____
3. Off-Campus Organization Contact Person Phone: _____
4. Off-Campus Organization Contact Person E-mail: _____
5. Off-Campus Organization Web Site: _____
6. Off-Campus Advertising Methods for Event: _____

De Anza College encourages the sponsorship of diverse activities for the campus community. The following guidelines are designed to facilitate De Anza College Student Organization sponsorships for such activities.

At all De Anza Student Organization Co-sponsored activities, it is understood the De Anza Student Organization Advisor or designee will be actively involved in conducting the event and will be present, on site, at all times, along with the Co-sponsored student organization that will be using the facility.

Primary purpose of the event is to serve members of the De Anza College community who participate in the event. In signing the Event Planning Request Form (reverse side) the originator is agreeing to assume responsibility for the College facility used and for the actions of the participants.

1. If there are any charges, tuition or fees requested in order to participate in the Co-sponsored activity, the total sum collected must be deposited with Student Accounts.
2. The Co-sponsorship opportunity shall not be used to circumvent fees and charges associated with the use of the College facilities.

Fees and Services

1. Appropriate charges will be assessed for the required services (including security, custodial, A/V and grounds and equipment).
2. In return for waiving of charges for the use of the facilities required services (including \$50.00 processing fee), the student organization members, student organization advisors or designee will be expected to be on site during the activity and to provide needed time and labor for clean up.

Student Activities Money Collection Form

Please complete form prior to collecting money. Once completed, please return it to La Donna Yumori-Kaku c/o Student Activities Office Front Desk. The information provided on this form will be put on the ICC Agenda (for Clubs) and forwarded to the Student Accounts Office. If there are any questions, a representative from the Student Accounts Office will contact you.

1. Student Organization Name: _____
2. Student Organization Contact Person: _____
3. Student Organization Contact Person Phone: _____
4. Student Organization Contact Person E-mail: _____
5. Date(s) for money collection: _____
6. Money is being collected for (list ALL items being sold, entry fees, donations, etc):

7. Selling Price Per Unit and Number of Units: _____

Student Organization Officer: _____
Print Name Signature and Date

Student Organization Advisor: _____
Print Name Signature and Date

Any student organization willfully and knowingly violating any of the DASB/ICC budget guidelines may have its funds frozen immediately. The student organization may be placed on inactive status and student(s) involved may be referred to the Student Discipline Officer.