

# OU College of Dentistry Event Request

COMPLETED FORM IS DUE AT LEAST TEN (10) BUSINESS DAYS BEFORE INTENDED EVENT\*

ORGANIZATION: \_\_\_\_\_

ACTIVITY/EVENT: \_\_\_\_\_

TYPE OF EVENT:

Lecture \_\_\_\_\_ Hands-On/Participation \_\_\_\_\_ Social \_\_\_\_\_

EVENT COORDINATOR: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

REQUESTED DATE and TIME of EVENT: \_\_\_\_\_

ESTIMATED # ATTENDING: \_\_\_\_\_

For Student Organizations Only:

\*Attach a list of names if 10 or fewer attendees

\_\_\_\_ Inside \_\_\_\_ Outside \_\_\_\_ SGA

REQUESTED ON-SITE LOCATION(S):

ROOM (Capacity)	DATE	START TIME	END TIME	NAME OF ON-SITE CONTACT
Commons				
104 - (82)				
108 - (82)				
159 - (30)				
161 - (63)				
163 - (30)				
540 - (60)				
Pre-Clinic Lab (Room 433)				
Robertson Clinic				
OMS Clinic				

PROPOSED OFF-SITE LOCATION(S):

LOCATION	DATE	START TIME	END TIME	NAME OF OFF-SITE CONTACT

WILL ALCOHOL BE SERVED? Y OR N

\*Alcohol service is required to end 30 minutes prior to the conclusion of the event.

\*For on campus events, only 3.2 beer and/or wine can be served.

\*Student advisor must be present during entirety of event on campus & on call for events off campus.

IS YOUR ORGANIZATION GOING TO PROVIDE FOOD? Y OR N

DATE	START TIME	END TIME	CATERER/VENDOR

\* If using a vendor, you must attach an agenda or meeting purpose. Also attach a catering license/permit if applicable (ex. food trucks)

DO YOU NEED THE FRONT DOORS OPEN? Y OR N (if on evenings and weekends)

IF YES, FROM WHAT TIME TO WHAT TIME \_\_\_\_\_

FRONT DOOR MONITOR \_\_\_\_\_

DO YOU NEED AUDIOVISUAL/COMPUTER TECHNICIAN? Y OR N

DO YOU NEED AUDIOVISUAL/COMPUTER EQUIPMENT? Y OR N

Microphone \_\_\_\_\_ Speakers \_\_\_\_\_ Distance \_\_\_\_\_ Other \_\_\_\_\_

SIGNATURES. (MANDATORY)

Event Coordinator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Faculty Advisor (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_

Ellen Ware \_\_\_\_\_ Date: \_\_\_\_\_

\*signature required for student organizations using inside accounts

Dean's Office Approval: \_\_\_\_\_ Date: \_\_\_\_\_

\*Please submit form to Kasie Menefee or Kim Kelley in the Dean's Office. They will reserve your space based on this form and availability.

\*For expenditures for student sponsored events over \$5000, 6 weeks of processing time is required.

\*Receipts for reimbursement and invoices should be submitted to:

Ellen Ware | Business Manager

DCSB 321

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