

amount requested \_\_\_\_\_

## mlc co-sponsorship request form

### ORGANIZATION INFORMATION

Organization Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Campus Mailing Address & Phone: \_\_\_\_\_

\_\_\_\_\_  
Email address: \_\_\_\_\_

### EVENT INFORMATION

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

Name, Title & Affiliation of Speaker: \_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Event Location: \_\_\_\_\_

Contact person for the event: \_\_\_\_\_

Requested will only be considered with an accompanying budget.

Description of Event:

Who is your anticipated audience?

Purpose of Event:

### EVENT ADVERTISEMENT

Please describe the current advertising plans for the event and other co-sponsors.

### EVENT FUNDING:

**amount requested** \_\_\_\_\_

Estimated Total Cost: \$ \_\_\_\_\_

Funding assistance requested from mlc: \_\_\_\_\_

List of items (reason for funding assistance): \_\_\_\_\_

\_\_\_\_\_

Additional sources of funding: \_\_\_\_\_

\_\_\_\_\_

**ADDITIONAL EVENT INFORMATION:**

Please list any additional information that is relevant to the event:

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*Please submit to "Lil Paraka, MLC, RC Box 270082" through campus mail,  
or email to [lil.paraka@rochester.edu](mailto:lil.paraka@rochester.edu)*

**Office Use Only:**

Date Received: \_\_\_\_\_ Time Received: \_\_\_\_\_ Initials: \_\_\_\_\_

Funding amount approved: \_\_\_\_\_

Date notified organization: \_\_\_\_\_