

# Event Proposal

---

## Requestor Information

Name of Requestor: \_\_\_\_\_

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

Coyote ID (if applicable): \_\_\_\_\_

Do you work in ASI:      Yes      No

## Program Information

Event Name: \_\_\_\_\_ Date(s): \_\_\_\_\_

Time(s): \_\_\_\_\_ Location(s): \_\_\_\_\_

Campus Partners: \_\_\_\_\_

Off-Campus Partners: \_\_\_\_\_

Brief Event Description:

Student Learning Outcome 1: \_\_\_\_\_

Student Learning Outcome 2: \_\_\_\_\_

Please select which category your event falls under (select just one):

Social Support & Making Connections

Campus Enrichment

Academic Success

Professional & Career Development

Generalized Life Skills

Health & Wellness

Volunteering/Outreach/Community Service

Diversity & Global Learning

Target Audience (e.g. specific student group if applicable): \_\_\_\_\_

Estimated attendance: \_\_\_\_\_ Estimated Budget: \_\_\_\_\_

\*Please provide details of your estimated budget using the **Event Budget Form**, and attach it by [\*\*CLICKING HERE\*\*](#).\*

How do you plan to market your event? (include physical and digital platforms)

**Reviewed by:**

**Approved by:**

\_\_\_\_\_  
Senior Program Coordinator

\_\_\_\_\_  
Associate Director or Designee