



## Campus Activities Board Co-Sponsorship Form

Student organizations wishing to be considered for co-sponsorship status with the Campus Activities Board must please fill out this form. Please note, the student organization must be in "good standing" with the College and be an official organization as recognized by the Campus Activities Office.

This application should be returned to Jeff Solberg or emailed to [jsolberg@gustavus.edu](mailto:jsolberg@gustavus.edu) at least **FOUR WEEKS** prior to the event. However, please feel free to contact us; we can discuss special circumstances on a case-by-case basis. Please contact Jeff Solberg with any questions regarding your application.

### *Co-Sponsorship Application*

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

Name of Event: \_\_\_\_\_

Organization: \_\_\_\_\_ Date of Event: \_\_\_\_\_

Event Location: \_\_\_\_\_ Time of Event: \_\_\_\_\_

Setup Time Length: \_\_\_\_\_ Clean-up Time Length: \_\_\_\_\_ Expected Attendance: \_\_\_\_\_

Description of Event:

How will this event benefit the College community?

Beyond monetary assistance, what role would you like the CAB Executive Board members to play in this event? Please check all that apply.

<input type="checkbox"/> Logistical Planning/Support Prior to the Event	Number of Executives needed: <input type="text"/>
<input type="checkbox"/> Setup	Number of Executives needed: <input type="text"/>
<input type="checkbox"/> Clean-up	Number of Executives needed: <input type="text"/>
<input type="checkbox"/> Support at the event	Number of Executives needed: <input type="text"/>
<input type="checkbox"/> Publicity	
<input type="checkbox"/> Other: _____	

### Estimated Cost of Event

Please fill out this portion of the form to your best ability. We understand that you may not know all the details at this time in the planning process.

\$ \_\_\_\_\_ Event  
\$ \_\_\_\_\_ Supplies  
\$ \_\_\_\_\_ Publicity  
\$ \_\_\_\_\_ Food/Drink at Event  
\$ \_\_\_\_\_ Other  
\$ \_\_\_\_\_ Other

\$ \_\_\_\_\_ Total Cost of Event

Requested amount of funding from CAB: \$ \_\_\_\_\_

Other funding sources: (Indicate both funding amount and the sponsoring organization)

Signature of Contact Person: \_\_\_\_\_

Signature of Advisor: \_\_\_\_\_

Date of Submission: \_\_\_\_\_

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### Campus Activities Board use ONLY:

Meeting Date: \_\_\_\_\_ Decision (Circle): Yes or No

Amount Granted: \_\_\_\_\_

More Details Needed:

## *Co-Sponsorship Publicity Agreement*

What are you looking for from the Campus Activities Board Publicity team in relation to this co-sponsored event? For a typical event we create 11 X 17" posters, a Facebook event and a Gustavus calendar event. Would you like to see more than these forms of publicity? Please describe in detail what forms of publicity you would like to see. (Other types of publicity would include: tickets, programs, table tents, shirts, videos etc)

What is the estimated cost of this publicity proposal?

Which team is responsible for creating and distributing posters around campus?

Which team will be creating the Facebook events?

Which team will be creating the Gustavus calendar event?

Who is the point of contact regarding this event's publicity? (Name and email please)