

SOUTHERN UNIVERSITY AT NEW ORLEANS

Campus Event Planning Form

Please complete this form at least 21 days before your event

Title & Description of Event: _____

Sponsoring Host: _____ Contact number: _____

Date of Event: _____ Start Time: _____ End Time: _____

Admission Charge: Yes _____ cost - (\$ _____) No _____

Advertisement (check all that apply): _____ Community _____ On-Campus Only _____ Other College Campuses

Event Location (Name of Room): _____ Number of people expected: _____

Please refer to the list below. Place a check mark next to the location desired. Secure the signature of Building Manager designated for the chosen location. Once you have secured the recommendation of the building manager, proceed to the additional required signatures. Your request is not finalized until approved by the Vice Chancellor for Administration and Finance.

Name of Building	Building Manager Listed Below
Gymnasium	Bernard Griffith, Athletic Director, Gymnasium, Room 209
University Center	James Rowley, Sr., University Center, Room 125
College of Business & Public Administration	Igwe Udeh, College of Business, Room 211
Lake Campus Multipurpose Complex, Rooms 609 & 611	Willie Jones, College of Education, Room 323
All Classrooms- Lake Campus and Park Campus	Sally Novatney, Academic Affairs, Bashful Bldg., Room 158
ITC	Edmond Cummings (ITC) 2 nd Floor
Cafeteria	Mickey Cornin, Aramark Manager
University Conference Center	Jullin Renthrope, Bashful Bldg., Room 301
Library	Shatiqua Mosby-Wilson, Library, Room 330
School of Social Work, Lecture Hall	Rebecca Chaisson, School of Social Work, Room 207
Millie M. Charles, School of Social Work Auditorium	Rebecca Chaisson, School of Social Work, Room 207

Individual Making Request: _____ Contact Number: _____

E-mail Address: _____ Cell Number: _____

If this request is by a student or student organization, you **MUST** secure the additional approval of the Advisor and Office of Student Activities.

Advisor: _____ Date _____

Mary Jackson _____ Date _____
 Director, Student Activities

-----REQUIRED SIGNATURES-----

Recommended _____ Date _____
 Building Manager:

Recommended _____ Date _____
 Bruce Adams, Chief-Campus Police

Recommended _____ Date _____
 Director of Facilities

Approved: _____ Date _____
 Jullin Renthrope, Vice Chancellor Adm & Finance
 (SIGNATURE REQUIRED FOR OFF-CAMPUS ORGANIZATIONS ONLY)

Please submit a copy of this signed form to Campus Police, along with a Work Request for the Facility Management Department. The Campus Event Planning Form must be approved at least 72 hours prior to event.