



REQUEST FOR COSPONSOR STATUS

INSTRUCTIONS: Complete the information below and attach to your completed Facility Reservation form a minimum of 30 business days in advance of your request for cosponsor status. Requests submitted without the related Facility Reservation form will not be considered.

Name		Today's Date	
Division/Department or Club			
I am requesting co-sponsor status in my role as (check one)		<input type="checkbox"/> Faculty	<input type="checkbox"/> Staff
How is this event related to your assigned responsibilities at NVCC?			
Date(s) of Event:			
Description/Purpose of Event:			
OUTSIDE ORGANIZATION INFORMATION (list additional co-sponsors on separate sheet)			
Company/ Organization			
Full Address			
Contact Name & Title			
<i>(in addition to the NVCC sponsor, this person will be the point of contact and the responsible party for the duration of the event)</i>			
Main Phone #	Cell/alternate #	FAX #	
E-mail	Web-Site (if available)		
ADDITIONAL INFORMATION (include a separate sheet if necessary)			
1. Will there be an admission charge for this event? <input type="checkbox"/> No (skip to #2) <input type="checkbox"/> Yes (complete 1a -c)			
a. Who will be managing sales? _____			
b. Will NVCC Students receive discount? <input type="checkbox"/> No <input type="checkbox"/> Yes _____ (indicate price/discount amount)			
c. Is this a fundraising event? <input type="checkbox"/> No <input type="checkbox"/> Yes (describe allocation of funds below)			

2. How does this event benefit the college and/or program? (Please be specific. Avoid descriptors such as "visibility")			

3. What are the anticipated outcomes of this event?			

4. Who will be responsible for advertising this event? (note: NVCC must be listed as a cosponsor on all materials) _____			

RESPONSIBILITIES OF COSPONSORSHIP			
9 Attendance at all times of event related activities		9 Attendance at all planning sessions	
9 Full participation in the planning of the event		9 Point of contact for logistical coordination with OFSEP	
9 Direct involvement and input into the event program		9 Negotiation of Measureable benefit to NVCC	
I have read, understand, and agree to the responsibilities of co-sponsorship as stated above.			
Signature of Requestor		Date:	
Signature of Student Activities Director (required only for NVCC Club events)		Date:	
<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/noted contingencies	<input type="checkbox"/> Not Approved	Ed Clancy Date: