

Monthly Event Plans for Campus

This report should be updated and submitted to the Office of Events Management by the first of each month. Please make sure your event is cleared through the Office of Events Management prior to publishing the event details to make sure there are no conflicts present in other areas of campus. The report may be emailed to showard7@samford.edu or events@samford.edu.

DEPARTMENT: _____

PERSON SUBMITTING REPORT: _____

EXTENSION/CELL PHONE NUMBER: _____

DATE OF REPORT: _____

PLEASE LIST ALL EVENTS YOU HAVE PLANNED FOR YOUR DEPARTMENT FOR THE MONTH/SEMESTER. A second page may be added if necessary.

NAME OF EVENT: _____

DATE: _____

TIME INCLUDING SET UP AND BREAKDOWN TIMES: _____

VENUE(S): _____

ATTENDANCE: _____

NAME OF EVENT: _____

DATE: _____

TIME INCLUDING SET UP AND BREAKDOWN TIMES: _____

VENUE(S): _____

ATTENDANCE: _____

NAME OF EVENT: _____

DATE: _____

TIME INCLUDING SET UP AND BREAKDOWN TIMES: _____

VENUE(S): _____

ATTENDANCE: _____

