Event Planning Check List

Approval must be submitted at least **four (4) weeks prior to an event or activity on campus** to allow for proper planning. Make sure you have submitted your request in the GWC Portal with the President's Office and 25Live.

Event Overview

Staff Lead: _____ Extension _____ Email _____

Who: (Department or Program Name) _____

_____

Is this a co-sponsored event with another department? Yes ☐ No ☐

Are you sharing resources with another department? Yes ☐ No ☐

What: (Name and brief Description of Event) _____

_____

_____

When: (Date)_____ (Start Time) _____

Setup Time: _____ Cleanup Time:_____

*** Have you checked 25Live to make sure there are no event conflicts?

Where: (Location)_____

Why: (Purpose) _____

_____

_____

Budget Account Number(s) (Auxiliary Funds) or (Banner Funds)_____

How Many (Approximate Number of Attendees) _____

Special Note:

Does GWC Executive Administrators or Managers need to be invited? Yes ☐ No ☐

Does Board of Trustees Members or District Executives need to be invited? Yes ☐ No ☐

*** If marked YES, make sure appropriate notifications have been sent to their offices to be placed on calendars.

Start Here for Event Planning

Request for Maintenance & Operations

Tables #_____ Chairs #_____ Trash Barrels #_____ Recycle Bins #_____ Other _____
Maintenance Staff _____ (fee may apply)

Request for TSS/Audio Visual Equipment

Microphones #_____ Stands #_____ Podium #_____ Multimedia Cart: _____ Projector and Screen _____

Lap Top Computer _____ Other _____ TSS Support Staff _____ (fee may apply)

Request for Public Safety

On-Campus Vehicle Escort Needed _____ Special Parking Permits _____ No Citing Day of Event _____

Request for Food Services

Will there food be served at the event? Yes ☐ No ☐

Vendor Contact Name: _____ Phone Number _____ Email _____

Is a W-9 on file? Yes ☐ No ☐

Vendor Number with District assigned? Yes ☐ No ☐

Are all County Health and Insurance Forms completed? Yes ☐ No ☐

Off-Campus /Non-Affiliated Guests and Visitors

Will this event be open to off-campus visitors/special guests? Yes ☐ No ☐

Guest Speakers and Entertainment

Will a speaker and/or entertainer be at the event? Yes☐ No☐

If yes, will the speaker and/or entertainer be paid? $ _____

Volunteer Activity Participation (All staff and students)

Does this event involve physical activities outside of normal day to day activities? Yes☐ No☐

Funding Sources

Will department/program funds be used? Yes☐ No☐

Will this event be a fundraiser? Yes☐ No☐

If yes, maximum amount of funds to be used $_____

Purpose of funds: Supplies _____ Pre-packaged food/beverages _____ Other (please specify) _____

_____

Transportation

Will district transportation be needed? Yes☐ No☐

Will off campus buses be dropping off or picking up students? Yes☐ No☐

Film Screening Requests

Will you be viewing a film, movie, or TV show? Yes☐ No☐

If yes, have Public Performance Rights to the film, movie, or TV show been obtained? Yes☐ No☐

All films viewed on campus MUST BE closed-captioned.

Disabled Students Programs and Services (DSP&S)

Will special services be needed for students or staff? Yes☐ No☐

Will an interpreter be needed for this event? Yes☐ No☐

If so, make sure arrangements are completed through DSP&S. There could be a cost for services.

Make sure event area has appropriate access for those in wheelchairs.

Publicity

Publicity information is available to help you market your event. This can be found by contacting College Promotions. Attached is a check off list of items to be considered doing. Please follow the campus Publicity Policy when putting up banners, posters and flyers.

1. Email GWC Promotions – promotions@gwc.cccd.edu
2. Campus Bulletin (Wavelength) under Campus Bulletin then Bulletin Requests – http://wavelength.gwcnews.com/resources/
3. Campus Life - See Forms – http://www.goldenwestcollege.edu/campus-life/

I understand the campus procedures for having events and will be present during the entire event (i.e. first to arrive, last to leave) and enforce the guidelines set forth by the college as well as any relevant district policies.

This form is strictly to help staff members and their manager's plan for better events on campus. Please keep this for your records.

Staff Signature _____ Date_____

Supervisor's Signature _____ Date _____

Vv 8-8-18