

(EIF) Event Information Form 2018 - 2019

Directions:

Please submit your completed EIF Form to the Reservations Office
Minimum 4 weeks before your event. Send it by email to:
reservations@wesley.edu or drop it off at the Reservations Office.
Do Not Advertise Your Event Until It Has Been Approved

Sponsoring Organization: _____

Name of Event: _____

Organization's contact person: (1 per event): _____

E-mail: _____

Phone Number: _____

Event date: _____

Start Time: _____

End Time: _____

Event Location: _____

Expected Number of People: _____

Have you reserved the room? Yes No

Are you inviting outside guests to attend your event? If Yes,
Please list them on last page of this form or a separate sheet of paper.

Are you serving food? _____

If yes, Please attach the price quote from Aramark or your food provider

Will you need a noise permit from the City of Dover for an outside event? Yes No
Did you fill out the forms?

*** Do you need tabling in CC Lobby?

Wesley College - Reservations Office - Lower Level of College Center Room 15
120 N. State Street, Dover, DE 19901 (302) 736-2593 Email: reservations @wesley.edu

********* Have you included the relevant documents with this form?

Are you hiring a vendor?

If, yes- then include the vendor's contract, invoice and Certificate of Insurance (naming Wesley College as the additionally insured)

If the fee is \$499 and under you will also need to submit a Check Request

If the fee is \$500 and over you will also need to submit a Purchase Order

Have you reviewed your budget with the SGA? Students Affairs (for SAB)? Yes No

Has the SGA approved this event? Students Affairs (for SAB)? Yes No

*****Budget Number** _____

Total cost of the event: \$ _____

Do you want the check to be mailed to the vendor Yes No

Pick up the check Yes I will pick up the check on _____

Is the event being advertised? (Yes) (No)

If yes, where? _____

Is the event being advertised on social media? Yes No

If yes, where? _____

Are there flyers for the event (flyer must be attached) Yes No

Has your advisor reviewed the event with you and signed off on it? Yes No

List of outside guests:

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*******Only completed EIF forms with all the necessary documents attached and signatures will be accepted for processing. If documents are missing, the forms will be returned to the event organizer.**

*******If your event is not completely approved 7 days before the event date, you may lose your room reservation.**

Approved By: Signatures needed before you turn the form over to Reservations Department

Signature of Event Coordinator: _____

Event Coordinator: Print name: _____

Date: _____

Signature of Advisor: _____

Advisor: Print Name _____

Date: _____

Reservations Office use only

Received by Reservations on _____ Time Received _____

Event # _____

IT _____

Coach Wearden _____

Security _____

Facilities _____

Aramark _____

SGA _____

V.P Finance _____

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