Wesley College (EIF) Event Information Form

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

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? If Yes, when______________________________
Detailed Description of the event. Please clearly write or type the information about your event. (For Example: We are having an Ice Cream Social with a DJ. We will need 5 tables set-up in the Underground. Please see the attached diagram. This event is for Wesley Students only.)
(For Travel: Explain the purpose of the trip and estimated costs and who is going on the trip)
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Set-up style:

☐ Classroom – tables and chairs
☐ Theater - just chairs
☐ Banquet: tables with chairs set for a dinner or luncheon
☐ Please attached the room set-up diagram

(Please note we only have 8 round tables and we use 5ft rectangular tables for set-ups)
A Vendor is someone you are hiring and paying for services such as: entertainment, rentals of any kind, Exercise Instructor, Photographer, Artist, DJ or selling or providing items or amusements for students. Each Vendor must provide you with a contract, an invoice, a certificate of insurance (naming Wesley College as the additionally insured) and a W-9 tax form, so they can get paid. *** Faculty and Students must not sign any contracts.

***** 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) W-9 form
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

**Faculty and Staff do not require SAB or SGA Approval.

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 Account Number _____________________________________________________

Total cost of this event: $_____________________________________

Do you want the check to be mailed to the vendor ___Yes ____ No
Pick up the check ___ Yes ___ No 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: Use an additional page if the list is long.
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
*****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.

Signature of Event Coordinator: ______________________________________________

Event Coordinator: Print name: ________________________________________________
Date: __________________________

**Required for Students only**
Signature of Advisor: _________________________________________________________

Advisor: Print Name _________________________________________________________
Date: __________________________

The above signatures are required before you turn the form over to Reservations Department

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**Reservations Office use only**

Received by Reservations on ________________ Time Received ________________

Event #______________________________

IT ________________________________

Coach Wearden or Coach Short ________________________________

Public Safety ________________________________

Director of Facilities ________________________________

Aramark ________________________________

SGA ________________________________ Date __________________

SGA Print Name: ________________________________

* ________________

V.P of Finance and Administration, Chief Financial Office

Date: ________________________ Print Name: ________________________________