

Florida A&M University
University Facility Request & Approval Form
EVENT DESCRIPTION/AGENDA

(Attach to form/or additional information to Facility Request & Event Approval Form)

NOTE: OSA COORD. APPROVAL REQUIRED FOR STUDENT EVENTS PRIOR TO SUBMISSION. _____

ORGANIZATION/AREA (Full Name/Student Organizations MUST BE CERTIFIED):

CONTACT (Name):

TELE.NO.

E-MAIL ADDRESS:

DATE OF EVENT (Month/Day/Year):

TIME OF EVENT (AM/PM):

NAME OF EVENT (Full Title – Same as will be used for Advertisement):

VENUE/BUILDING/AREA (Name):

TYPE OF EVENT (Executive Board Meeting/General Body Meeting/Committee Meeting/etc.):

ATTENDANCE (Anticipated/Expected – Based on size of Venue):

AGENDA/DISCUSSION TOPICS/SPEAKER(S)

NOTE: Refreshments (if served) should be purchased items (maintain receipts), outside vendor information must be supplied/approved (caterer, etc.). Should the meeting/or workshop be of a conference size and/or will include non-university participants, names, contact information/agency, etc. information is required (contact facility committee representative @ 850-599-3400 for questions/concerns).