ASDU

ASSOCIATED STUDENTS of DOMINICAN UNIVERSITY

Programming Packet

Programming Guidelines

Prior to the Event:

1. Turn in forms #1, #2 & #3 to the Director of Programming – preferably 2 weeks prior to the event.
2. You will present this information to ASDU. Then, the Director of Programming will review the information and work with you on making the necessary set-up arrangements.
3. Please complete the attached Publicity Request Form if you wish ASDU to assist in advertising your event.

After the Event:

1. Turn in form #4 (Evaluation) along with all receipts and financial records into the ASDU Director of Programming within 1 week of the program.
2. Reimbursements are due within 1 week of the program and must be submitted to the Director of Programming. Reimbursements should be processed within 10-14 business days.
3. Be sure to send thank you notes/cards when appropriate.

IMPORTANT INFORMATION:

- ALL events must be approved by ASDU & the Office of Student Life.
- Outdoor events are subject to restrictions as determined by the Events Management Plan (EMP). Event planners should work closely with the Office of Student Life to determine if outdoor events will meet the guidelines of the EMP.
- Event planners are expected to be present for the duration of the event.

Contact ASDU

Please contact any of the individuals below if you have any questions about your event/activity.

Eleno Nunez
President
Associated Students of Dominican University (ASDU)
Eleno.Nunez@students.dominican.edu

Victoria "Tori" Escalada
Director of Programming
Associated Students of Dominican University (ASDU)
Victoria.Escalada@students.dominican.edu

Paul Raccanello
Dean of Students
ASDU Advisor
Paul.Raccanello@dominican.edu
Office: Edgehill Mansion, 2nd Floor

(Please speak with Paul in order to reserve a room on campus)

FORM # 1 – PROGRAM PROPOSAL

Program title:_____

Event date and time:_____ Duration:_____

Location:_____

Host:_____

Sponsors (if any):_ASDU,_____

Estimated cost of program:_____ *(see & complete form #2)*

(Please be sure to submit the attached forms #2 & #3)

WILL YOU NEED ANY OF THE FOLLOWING?

☐ Student Union Access

☐ PA/Sound system

☐ BBQ or Coolers

☐ Tables/Chairs (#_____)

☐ Other/Special accommodations (if any):_____

_____

Briefly Describe the Event:_____

_____

_____

_____

_____

_____

_____

Program Coordinator Name(s):

_____ _____

Print Name Date

_____ (_____)_____

Email Address Phone

FORM # 2 – PROGRAM BUDGET WORKSHEET

PROGRAM: _____

NEEDS	QUANTITY	EST. COST
	TOTAL EVENT COST=	

FORM # 3 – PROGRAM TO DO WORKSHEET

ITEM, ACTIVITY, OR OBJECTIVE TO COMPLETE	PERSON RESPONSIBLE	BY WHAT DATE

FORM #4 – PROGRAM EVALUATION

To be completed by the event coordinator and turned into the ASDU Director of Programming no later than one week after the event.
Please submit all receipts, invoices, $ profit with this form.

Program title:_____

Event date:_____ Event time:_____

Location:_____

General Information

Projected Attendance:_____ Actual Attendance:_____

Event sponsors (clubs, departments, organizations) : _____

_____

_____

_____

Did you charge a fee/admission to attend this event? Y N

If YES, how much money did you earn?_____

Event Summary

1. What were the successful aspects of this event?

2. Should this program be repeated? Why or why not? What changes or improvements would you make?