

SMU International Center Entertainment Event Proposal Form

Area: _____

Single Event: YES NO

If answered NO then how frequent will the event be? _____

Budget to charge: FUND: _____ ORG: _____ AMOUNT: _____

Date of Proposed Event: _____

Campus ON/OFF: _____

Location

Names of attendees: _____

Why is the proposed event critical to the mission of The International Center? _____

Requester: _____ Date: _____

IC Executive Director's Approval: _____ Date: _____

IC Financial Officer's Approval: _____ Date: _____

Associate Provost's Approval: _____ Date: _____

Provost Financial Officer's Approval: _____ Date: _____

Comments: _____

Please return to requester at P.O. Box 391