

PUBLIC PROGRAMMING Co-SPONSORSHIP FORM

(3/17)

Submit this form with your preliminary budget to Luis Guevara (lvg@austin.utexas.edu)

NAME: _____ DATE: _____

AFFILIATION: _____

DATE OF EVENT: _____

TITLE OF EVENT/FUNCTION: _____

DESCRIPTION OF EVENT/FUNCTION:

COMMITTED CO-SPONSOR(S): _____

COMMITTED AMOUNT(S): _____

UNIT REQUEST: CMAS MALS LRI

REQUESTED AMOUNT(S): _____

VENUE NEEDS: _____

A/V NEEDS: _____

PUBLICITY NEEDS: _____

CATERING NEEDS: _____

OTHER EVENT NEEDS: _____