**Student Led Event Submission Form**

Please complete this form as well as a risk assessment, budget form and room booking form **4 academic weeks** prior to the event date and email it to the **Societies** inbox at [**societies@uel.ac.uk**](mailto:societies@uel.ac.uk)

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**Contact Details**

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| Society Name (if applicable) |  |
| Contact Name (organiser) |  |
| Student No. |  |
| Contact Email |  |
| Contact Mobile No. |  |
| Committee Position (if applicable) |  |

**Event Details**

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| --- | --- |
| Title of Event: |  |
| Proposed Date: |  |
| Event Location: |  |
| Set Up Time: |  |
| Start Time: |  |
| End Time: |  |
| Clear Down Time: |  |
| Event Type | ☐Social  ☐Cultural  ☐Fundraising  ☐Entertainment  ☐Education  ☐Other |
| Event Description, Purpose & Activities |  |
| Event Objectives  (SMART objectives) |  |
| Estimated No. of Attendees |  |
| Attendee Type | ☐ Exclusive to Members of Society listed above  ☐ All UELSU Students  ☐ UELSU Staff  ☐ External Visitors |
| Is the event ticketed? | ☐Yes ☐No |
| Is the event free? If no, what is the cost? | ☐Yes ☐No  Cost: |

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| Equipment Required and Description  (i.e. microphone, speakers, tables, chairs) | ☐Yes ☐No |

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| Do you require catering? | ☐Yes ☐No |

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| Marketing Requirements from Students’ Union | ☐ None (self-marketed)  ☐ Posters (please note poster requests must be made **3 weeks** in advance of event)  ☐ UELSU Website (www.uelunion.org)  ☐ UELSU Social Media (Facebook, Instagram) |

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| Are you having a guest speaker? | ☐Yes ☐No  If yes you need to complete the External Guest Speaker Form. |

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| Have you budgeted for all event costs? | ☐Yes ☐No  Please use the Events Template Budget on the website. |

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| Have you completed a risk assessment? | ☐Yes ☐No  Note: please send the Risk Assessment along with this form. |

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| Have you completed a room booking form? | ☐Yes ☐No  Note: Please submit a Room Booking Form at: [www.surveymonkey.com/r/Societyroombooking2017-18](http://www.surveymonkey.com/r/Societyroombooking2017-18) |

**To be completed by Societies Coordinator:**

Print Name:

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|  |

Signed:

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Date:

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