

# Event Co-Sponsoring Form

For use by organizations co-sponsoring programs - Attach additional sheets if necessary

## Primary Organization Information:

(Information on the Organization that will incur most of the financial burden of the event)

Organization Name: \_\_\_\_\_

President Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Treasurer Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Advisor Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

## Co-Sponsor Organization Information:

(Information on the Organization that will serve as a co-sponsor)

Organization Name: \_\_\_\_\_

President Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Treasurer Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Advisor Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

## Co-Sponsor Organization Information:

(Information on the Organization that will serve as a co-sponsor)

Organization Name: \_\_\_\_\_

President Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Treasurer Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Advisor Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

## Program Information:

Program Name: \_\_\_\_\_

Program Date: \_\_\_\_\_ Program Time: \_\_\_\_\_ Program Location: \_\_\_\_\_

Presenter/Entertainer Name: \_\_\_\_\_

Program Description: \_\_\_\_\_

\_\_\_\_\_

## Co-Sponsorship Information:

What is the total cost of this program? \_\_\_\_\_

Please explain (in detail) how much money each organization is responsible for providing and the types of costs (i.e. publicity, speaker fees, food, etc.) for which the money is available:

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Please indicate which group will be responsible for the following tasks (if the task does not apply to this program, please write N/A):

Reserving Rooms/Space: \_\_\_\_\_

Food/Refreshment Arrangements: \_\_\_\_\_

Preparing/Printing Publicity: \_\_\_\_\_

Obtaining Proper Approval on Publicity: \_\_\_\_\_

Distributing/Hanging Publicity: \_\_\_\_\_

Performer Contact/Contract Negotiations: \_\_\_\_\_

Performer Accommodations/Supervision: \_\_\_\_\_

Preparing/Submitting Funding Proposals: \_\_\_\_\_

Tracking Evaluation Measures (Attendance, Budget, etc.): \_\_\_\_\_

Other (please explain): \_\_\_\_\_

Other (please explain): \_\_\_\_\_

Other (please explain): \_\_\_\_\_

Organization Representatives sign/date: \_\_\_\_\_

Advisors sign/date: \_\_\_\_\_

Thank you so much for your time.  
If you have questions on this evaluation,  
please contact the Office of Student Activities,  
at [student.activities@iit.edu](mailto:student.activities@iit.edu) or 312-567-3720.