

Student Organization UniFORM (Request for events, fundraising, CoCuLO activities)

Student Organization:	
Event:	
Date(s) of Event:	Location:
Address:	
Time of Event:	Estimated hours that will be spent at event:
Brief description of event/ac	tivity* (e.g. health fair/blood pressure screenings; fundraising; nursing home/ brown bag event):

Nature of Activity (Check all that apply):

Professional Meeting	Fundraising	Social
Community Service Event	Legislation	□ Other:

Event Information

	Name/Title	Contact Info (email and phone number)
Local/State/National Organization		
Other Schools/Organizations Involved		
Preceptor(s)		
For event approval, a preceptor must be identified if health screenings are being conducted		

Is this event/activity open to all students? No Yes

Budget/Funding Requested: Question No Question Yes

***NOTE:** If yes, an itemized estimate of costs must be attached and signed-off by organization advisor.

Marketing/Advertising/Educational Materials* (Check all that apply):

None
 Main Lobby Monitor
 Original Materials Posted Within the College
 Use of CNUMPS Logo Requested
 Original Materials Posted Outside College

***NOTE:** All promotional and/or educational material must be attached and approved by organization advisor and MPS.

Supplies Requested: No Yes

*NOTE: If yes, please complete the table below and specify the item requested, quantity, and size of items needed, if applicable (ex: band aids, #200, medium).

Items Requested	Quantity	Size

Contact Info:

Primary Contact:	President:	
Phone Number:	Phone Number:	
Email:	Email:	
Signature:	Signature:	

Co-Curricular Learning Outcomes:

Please select which co-curricular learning outcome(s) this event fulfills, if applicable.

- □ 1. Social awareness and cultural sensitivity
- □ 2. Professionalism and advocacy
- □ 3. Self-awareness and learning
- □ 4. Innovation/entrepreneurship
- \Box 5. Public health and education
- □ 6. Service and leadership

Please describe how this activity or event specifically fulfills this co-curricular learning outcome selected above.

Upon completion of the event, each student must submit a written narrative describing his/her experience at the event. The specific question that must be addressed is located on CANVAS in the Co-Curricular Learning Activity Course. Narratives should be no greater than 250 words and must address each component of the question. After submission of the narrative, each student should notify his/her faculty advisor that he/she has submitted a narrative. The advisor will then use a rubric to score the narrative.

Faculty Advisor Signature:	Print Name:
Date:	

The UniFORM and all associated documents must be completed, signed by the organization advisor, and submitted to the MPS Office no later than 14 days prior to the event.

	MPS Office Use Only	
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UniFORM/Proposal received by: Signature		Date:
CoCuLO Approved:	CoCuLO Denied:	
Event Approved by: Signature		Date:
Activities and events h	eld on campus must be approved by Unive	rsity Operations, if applicable.
University Operations:		
Approved: Denied	: Signature	Date:
	· 0.5.140010	Date: