Office of University Events
Event Request Form

Instructions: Download this PDF and save to your computer. Next fill out the form completely and save your changes. Then email the completed PDF to events@nsu.edu
If you have questions regarding this form, please contact Alexis J. Martin, Event Planning Coordinator at 757-823-2987 or ajmartin@nsu.edu.

Requesting Department/Individual: ____________________________________________

Name: ______________________________________________________________________

Phone: ______________________________________________________________________

Email: ______________________________________________________________________

Event Date: ____________________________ Time: ________________________________

Location of Event: __________________________________________________________________________

*If you are planning to host your event at the L. Douglas Wilder Performing Arts Center, please contact Rhonda Britt at 757-823-2061 or rbrritt@nsu.edu.

Location Confirmed: _____ Yes _____ No

Type of Room Set Up Requested:

_____ Class room (tables with chairs) _____ Table Rounds

_____ Auditorium (chairs only) _____ Room As Is

_____ U Shape Other: ________________________________
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Type of Event:

_____ Meeting (Board, Committee, Departmental)

_____ Luncheon

_____ Dinner

_____ Reception

_____ Lecture

_____ Speaker Panel

Other: ________________________________

Event Description: ____________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

Estimated number of participants: _______

AV Equipment Needed:

_____ Laptop

_____ Microphone(s) How many? ________

_____ Projector

_____ None

_____ Sound

Other: ________________________________

Do you have any catering needs? _____ Yes _____ No

Click here to contact Thompson Hospitality for menus and quotes.
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Decor Needs: Please check off if you require any of the following items. The Office of University Events will work to accommodate your needs. Due to limitations in supplies, not all requests can be met.

_____ NSU Logo Placard- to attach to items such as a podium
_____ NSU Podium Banner
_____ NSU Table Banner
_____ Table linens with NSU Logo (for 6-8' tables) How many? ______
_____ NSU Pop up display (tradeshow type display)
_____ Easels
_____ Large Ceremonial Scissors (for ribbon cutting)
_____ None

Other: ____________________________________________________________

Are you planning to provide a coat check service? _____ Yes _____ No

Is the University President attending the event? _____ Yes _____ No

If yes, what is the expected participation/involvement? ____________________________________________________________

__________________________________________________________________________________________

Has this date been reserved on the President’s calendar? _____ Yes _____ No

Who will meet the President at the event? __________________________________________________________

Please provide a phone number for person meeting the President at the event: __________________________


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Please provide an email address for the person meeting the President at the event:
______________________________________________________________________________

Is the president being requested to speak? _____ Yes _____ No

*Please submit an official copy of the program/agenda at least two weeks in advance of event to the President’s Office.*

If yes, what topics should be addressed by the President?
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

What is the dress code for this event?
_____ Business professional _____ Business casual _____ Formal _____ Other: _______________________

Is there a theme for this event? If so, please describe:
______________________________________________________________________________

Please provide a brief history of the event. (inaugural, annual, etc.):
______________________________________________________________________________
______________________________________________________________________________

Are any legislators, government officials, or dignitaries attending this event? _____ Yes _____ No

If yes, please provide the name(s) of the legislator(s), government official(s) or dignitaries attending:
______________________________________________________________________________
______________________________________________________________________________

Any special considerations needed for the event? _____________________________________________
______________________________________________________________________________
______________________________________________________________________________

Please provide the name of your Immediate Supervisor: _________________________________

Please provide the email address of your Immediate Supervisor: ___________________________