

Request for group activity to be conducted by Student Support personnel

Organising Person: _____ Contact Number: _____

Department/School/Section: _____

Course/Program/Project Title: _____

Today's date: __/__/__ Date* of proposed Activity: __/__/__

Proposed name of activity: _____

Proposed venue: _____ Duration of event: _____

Anticipated number of participants: _____ Minimum number required: _____

Participant characteristics: _____

Details of how the activity is being promoted: _____

Nature of the segment(s) Student Support will provide: _____

Duration of the segment(s) Student Support will provide: _____

Student Services staff member allocated: _____

Date for first planning meeting between Student Support staff, organiser and other presenters
 __/__/__

Area of Responsibility	Name of Person assuming responsibility
Promotion of activity	
Organisation of venue	
Organisation of IT requirements, etc	
Signage for the activity	
Refreshments/lunch for participants	
Participants parking requirements	
Duplication of participants notes	
Evaluation – whole program or part?	

Date to discuss participants evaluation: __/__/__

Office Use only

Approved / Not Approved Student Support (circle)

* At least three working weeks notice is the minimal acceptable time between date of request and date of delivery of activity