

**COLLEGE OF PHARMACY**  
**EVENT & BUDGET REQUEST FORM**  
**ROUTING CHECKLIST**

Name of Event: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

**Please follow the routing path below 30 days prior to your event.**

**Event and Budget Request Approval Process**

- Complete the event and budget request approval form including the budget estimate
- Route form to your Department/Unit head for approval
- Route to Senior Director of Finance/Administration for funding source search/check
- Senior Director of Finance/Administration recommends funding source, includes fund purpose and balance then routes to Dean's Office for her signature
- Dean's Office returns signed copy to Senior Director of Finance/Administration
- Senior Director of Finance/ Administration will make a PDF copy of form for Business Office records and send a copy to requestor
- Senior Director of Finance/ Administration notifies requestor of approval via email and places signed copy in requestor's mailbox
- If applicable, External Affairs is also notified of use of foundation funds for stewardship purposes

# COLLEGE OF PHARMACY

## EVENT & BUDGET REQUEST FORM

Docuware EventNumber \_\_\_\_\_

**Complete form 30 days prior to your event.**

*If your event is reoccurring (i.e. weekly seminar or meeting), please complete the form for the entire semester with a total estimate.*

| <b>EVENT INFORMATION</b>                                    |   |
|---|---|
| Today's Date  |   |
| Event Planner's Name and Contact Information                |   |
| Department/Unit   |   |
| Name of Event (should match name in Gail)                   |   |
| Date of Event   |   |
| Would you like the Dean to attend your event?               | Yes _____ No _____ If Yes, confirm the Dean's schedule with <a href="#">ToniPhelabaum</a> . |
| Start Time of Event   |   |
| End Time of Event   |   |
| Location of Event (include address)                         |   |
| Business Purpose (Payment purpose)                          |   |
| Event Description (Brief description of your event)         |   |
| Potential Impact/Desired Outcome                            |   |
| Estimated number of Attendees and Relationship with College |   |

## BUDGET–Expenses

- *Attach supporting documentation for items listed below if applicable*
- *Include a minimum of two estimates of catering, rentals, etc.*

| Estimated Expenses  | Amount | Approved Funding Source | UGA System to Process Financial Transaction |
|---|--------|-------------------------|---|
| Venue/Facility Rental   |        |                         |   |
| Catering/Food/Beverage  |        |                         |   |
| Speaker   |        |                         |   |
| Equipment rental (Tables, chairs, etc.)<br><br><i>*Facilities Management Division cannot use foundation funds</i> |        |                         |   |
| Entertainment   |        |                         |   |
| Supplies (Office, etc.)   |        |                         |   |
| Advertising / Promotional Printing  |        |                         |   |
| Postage   |        |                         |   |
| Technology Expense (AV, etc.)   |        |                         |   |
| Decorations/Floral  |        |                         |   |
| Custodial Services  |        |                         |   |
| Items needed from CoP Event Department<br><br>(Ex: tablecloths, vases, centerpieces...)                           |        |                         |   |
| Other items (specify)   |        |                         |   |
| <b>Total Estimated Expenses:</b>  |        |                         |   |
| <b>Total Catering Price per Person:</b>   |        |                         |   |

**BUDGET –  
Income**

- *If applicable, complete this section if you are collecting registration, fees, sponsorship funds, ticket sales, etc.*
- *Complete Foundation form if income is collected through GAIL system*

| <b>Estimated Income</b>       | <b>Amount</b> | <b>Account<br/>Income to<br/>be Deposited</b> |
|-------------------------------|---------------|---|
| Income (specify)              |               |   |
| Income (specify)              |               |   |
| Income (specify)              |               |   |
| Income (specify)              |               |   |
| <b>Total Estimated Income</b> |               |   |
| <b>Total Estimated Cost*</b>  |               |   |

*\*Total Estimated Expenses – Total Estimated Income = Total Estimated Cost*

**Notes:**

**APPROVALS**

| <b>Person</b>  | <b>Signature</b> | <b>Date</b> |
|--|------------------|-------------|
| Requested by   |                  |             |
| Approved by Unit Head                                    |                  |             |
| Approved by Senior Director of<br>Finance/Administration |                  |             |
| Approved by Dean   |                  |             |

## OTHER EVENT DETAILS TO CONSIDER

*This form is for your planning purposes only. Do not submit with your Event and Budget Request Form.*

| Event Details to Consider   | Who to Contact  | Date Initiated | Date Completed |
|---|---|----------------|----------------|
| Do you need to reserve a room?  | Place a Pharmacy Room Reservations Ticket via Pharmacy IT Helpdesk  |                |                |
| Will you need video conferencing, recording or AV?  | Place a Pharmacy Videoconference and Recording Request Ticket via Pharmacy IT Helpdesk  |                |                |
| Will you need facilities management support (custodial services, tables and chairs moved, extra trashcans, etc.)? | Place a Facilities Request Ticket via Pharmacy IT Helpdesk  |                |                |
| Will the lock schedule for the building need to be changed?   | Place a Facilities Request Ticket via Pharmacy IT Helpdesk  |                |                |
| Will you need name badges?  |   |                |                |
| Will you need to order any office supplies?   |   |                |                |
| Will you need additional signage for the event?   |   |                |                |
| Will you need additional staff support/volunteers (set up/break down, greeters, etc.)?                            |   |                |                |
| Will you need photography services?   | Contact Mickey Montevideo<br><a href="mailto:mickeym@uga.edu">mickeym@uga.edu</a>   |                |                |
| Will you need graphic design support (invitation, flyer, etc.)?   | Contact Mickey Montevideo<br><a href="mailto:mickeym@uga.edu">mickeym@uga.edu</a>   |                |                |
| To publish your event to the CoP Master Calendar  | Contact Jeanne Prine<br><a href="mailto:jsprine@uga.edu">jsprine@uga.edu</a>  |                |                |
| Will you need social media services?  | Contact Mickey Montevideo<br><a href="mailto:mickeym@uga.edu">mickeym@uga.edu</a>   |                |                |
| Are you producing products (giveaways, etc.) using the College logo?  | Contact Mickey Montevideo<br><a href="mailto:mickeym@uga.edu">mickeym@uga.edu</a>   |                |                |
| Do you need current CoP giveaways, swag, etc.?  | Contact Mickey Montevideo<br><a href="mailto:mickeym@uga.edu">mickeym@uga.edu</a><br>or <a href="mailto:Jessica.Hart@uga.edu">Jessica Hart jchart@uga.edu</a> |                |                |
| Do you need catering support items (tablecloths, decanter, coffee pot, etc.)?                                     | Contact Gloria Strait <a href="mailto:gstrait@uga.edu">gstrait@uga.edu</a>  |                |                |
| Will you need decorative items (vases, etc.)?   | Contact Gloria Strait <a href="mailto:gstrait@uga.edu">gstrait@uga.edu</a>  |                |                |
| Do you need to enter your event in GAIL?  |   |                |                |
| Do you need hotel rooms?  |   |                |                |
|   |   |                |                |