

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

COMPLETED BY THE BUSINESS AFFAIRS OFFICE

- Complete the UGA Foundation Event Approval Form (if applicable)

EVENT & BUDGET REQUEST FORM

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.

| EVENT INFORMATION | |
|---|---|
| Today's Date | |
| Event Planner's Name and Contact Information | |
| Department/Unit/ Student Organization | |
| 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 ToniPhelabaum . |
| Start Time/End Time of Event | |
| If hosting a speaker, please notify the Office of Development and Alumni Relations. | Contact Lee Snelling at snelling@uga.edu |
| Location of Event (include address) | |
| Business Purpose (Payment purpose) | |
| Event Description (Brief description of your event and its Potential Impact/ Desired Outcome) | |
| The CoP is proud to host alumni and other constituents at events. If hosting a speaker, please provide their name, the time they are speaking, and the topic. | |
| 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.) <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 (Ex: tablecloths, vases, centerpieces...) | | | |
| Other items (specify) | | | |
| Total Estimated Expenses: | | | |
| Total Catering Price per Person: | | | |

**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*

| Estimated Income | Amount | Account Income to be Deposited |
|-------------------------------|---------------|---|
| Income (specify) | | |
| Income (specify) | | |
| Income (specify) | | |
| Income (specify) | | |
| Total Estimated Income | | |
| Total Estimated Cost* | | |

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

Notes:

APPROVALS

| Person | Signature | Date |
|--|------------------|-------------|
| Requested by | | |
| Approved by Unit Head | | |
| Approved by Senior Director of 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 Room Reservation Request via https://helpdesk.rx.uga.edu/ | | |
| Will you need video conferencing, recording or AV? | Place a Videoconferencing and Recording Request via https://helpdesk.rx.uga.edu/ | | |
| Do I need facilities management support (tables, chairs, trashcans, custodians, etc.) or the lock schedule for the building changed? | Place a Facilities Request via https://helpdesk.rx.uga.edu/ | | |
| 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.)? | | | |
| Do I need graphic design support (flyers, invitations, etc.), advertising (social media, PharmDawg Script, etc.) or production of products using the College Logo? | Contact Mickey Montevideo mickeym@uga.edu | | |
| To publish your event to the CoP Master Calendar | Contact Jeanne Prine jsprine@uga.edu | | |
| Do I need catering support items (tablecloths, coffee pot, etc.) or decorative items (centerpieces, etc.) | Contact Gloria Strait gstrait@uga.edu | | |
| Do you need to enter your event in GAIL? | | | |
| If Hosting a Speaker, do I have a "thank you" prepared for them? | Contact Jessica Hart for gifts/swag jchart@uga.edu | | |
| Do I need a hotel reservation? | | | |
| If providing a meal for a guest speaker, be sure to include total in Event Budget Request above. | | | |