



Co-Curricular Event Request Form

This form is for Germanna Staff/Faculty to request a co-curricular event. Principles of Co-Curricular Events

- 1. Must have a direct link to a measurable student learning outcome or support activities intended to further student learning related to a particular college-sponsored activity.**
- 2. Must identify an assessment measure(s) for learning outcomes.**
- 3. Must be initiated by a faculty member(s). Requests must be submitted 4 weeks in advance of the event and will be reviewed by the Student Activities Coordinator.**

Date: _____

Contact Information

Name: _____
Department: _____
Contact Email: _____
Phone Number: _____

Name of course(s) or professional organization/activity for which this event requested.

Please identify at least one student learning outcome (SLO) that is served by this activity. (Required) Examples are: Real-World Applications How is the event connected to the curriculum How does the event enhance classroom learning.

Please indicate how you will assess the event's effectiveness in achieving the student learning outcome(s). (Required) Examples of assessments are: Reflective writing about the experience Including a question about the event on a test an online discussion about the event that addresses the SLO A project that incorporates the experience.

Name of event: _____

Date, Time & Location: _____

Description of Event:

Number of students participating (approximate if not known): _____

Funds Requested ____ Yes ____ No

Please complete the following: Is a reservation or registration required? (i.e., conference, performance, tour, etc.) ____ Yes ____ No

If yes, funds requested and participants if traveling on a conference: Please provide a link to registration or reservation page

Are travel arrangements needed? ____ Yes ____ No

What type of travel

____ Charter bus (55 passenger) ____ Charter vehicle (10-14 passenger)

____ Germanna Vehicle (staff must drive) ____ Public transportation (Air, Train)

____ No transportation needed

Departure time from Campus: _____

Departure time from destination: _____

Please indicate the point of contact for your trip as well as a contact number to be provided to the transportation company. This person should be present on the date of the trip. Please respond n/a if no transportation is required.

Please specify if your event requires catering services. If not respond n/a. If catering is requested please indicate the following: how many people you're feeding, type of food, buffet style or served. _____

Please list here any other information you feel will assist Student Activities in considering your request.

Total funding requested: _____

Add any attachments and/or supporting documents when sending your request.

Requests should be sent to Student Activities, FAC SP1, Room 100 or studentactivities@germanna.edu. Thank you.