

**BIRMINGHAM-SOUTHERN COLLEGE  
STUDENT AFFAIRS PROGRAM/EVENT FORM**

Event: \_\_\_\_\_

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

Time \_\_\_\_\_ Location: \_\_\_\_\_

Name of event: \_\_\_\_\_

Sponsored by: \_\_\_\_\_

Person in Charge: \_\_\_\_\_

Give a brief description of the event: \_\_\_\_\_

\_\_\_\_\_

Was the facility:      Too large \_\_\_\_\_      Too small \_\_\_\_\_      Just right? \_\_\_\_\_

Number attending:: \_\_\_\_\_ Student \_\_\_\_\_ Faculty \_\_\_\_\_ Staff \_\_\_\_\_ Other \_\_\_\_\_

If attendance was low, what do you attribute to low participation?

\_\_\_\_\_

\_\_\_\_\_

Was this an annual event? \_\_\_\_\_

Was CEIS Credit requested? \_\_\_\_\_

Was it approved? \_\_\_\_\_ (Please attach the completed request form)

Was there a vendor that you preferred? (please list) \_\_\_\_\_

Did you have a good experience working with the vendor and would you use them again?

\_\_\_\_\_

\_\_\_\_\_

FINANCIAL REPORT

Total cost of event: \_\_\_\_\_

Attach a line item budget including detailed information. Each budget will need to be itemized according to the event. Some of the examples of information that should be included: contracted entertainment price, facility, security, technical, food, publicity, supplies, miscellaneous.

Was there a charge for this event: Yes \_\_\_\_\_ No \_\_\_\_\_

Was funding adequate? \_\_\_\_\_

Student Fee \_\_\_\_\_? General Public \_\_\_\_\_?

Revenue : \_\_\_\_\_ ( including ticket sales, food sales, t-shirt sales, etc.)

Cost per student: \_\_\_\_\_ Cost per person: \_\_\_\_\_

(Example: if the total cost of the event was \$1,000 and you had 100 people in attendance your total cost per person would be \$10.00)

PROMOTION

Who was responsible for the promotion of this event? \_\_\_\_\_

List all promotion used: \_\_\_\_\_

\_\_\_\_\_

What forms of promotion were most effective? \_\_\_\_\_

Please attach one copy of each type of promotion used including posters, table tents, flyers, and programs.

OVERALL EVALUTION

How do you feel the program was overall?

Excellent \_\_\_\_\_ Good \_\_\_\_\_ Fair \_\_\_\_\_ Poor \_\_\_\_\_

Explain why: \_\_\_\_\_

\_\_\_\_\_

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Would you suggest this program be repeated? Yes\_\_\_\_\_ No\_\_\_\_\_

Why? \_\_\_\_\_

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What improvements could you suggest for this event for the future? \_\_\_\_\_

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PARTICIPANTS

Please list all of the committee members that worked the event (including you):

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

An evaluation must be sent within two weeks upon completion of the event to Gwen Dill, in the Office of Student Affairs.