



Washburn University Full or Joint Sponsorship Application

Date: _____

To: _____

From: University Scheduling
Memorial Union –x 1707 or 1725

This application is to be used to determine if the event listed below is entitled to (full or joint- **please circle one**) sponsorship by Washburn University.

Full sponsorship allows organizations to use facilities at 0% of the basic facilities use fee, but shall be subject to special services and damages at 100% of the regular rate. Full sponsorship may be based on a yearly basis whereas the latest annual report of the Non-University Group is reviewed.

Joint sponsorship allows organizations to use facilities at 50% of the basic facilities use fee, but shall be subject to special services and damages at 100% of the regular rate. Joint sponsorship is based on a per event evaluation.

To be considered for **full** sponsorship, a Non-University Group, and its proposed activity, must:

1. Provide significant benefit to the University; or,
2. Be such the lack of full sponsorship would adversely affect the University.

To be considered for **joint** sponsorship, a Non-University Group, and its proposed activity, must:

1. Attendance will consist of primarily campus-related individuals
2. Presenter fees are paid by the University organization or Department
3. The University must be recognized as a joint sponsor in all publicity related to the event
4. University association with the event does not violate any other University contract, policy, or agreement
5. Personnel of the University must be involved in the planning, implementation, and on-sight monitoring at the event
6. The function of activity must further the recognized University mission of education or community service.

Name of Group _____ **Contact Person** _____

Phone/Email _____

Title of Function _____

Date(s) of Function _____ **Location** _____

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Washburn University Full or Joint Sponsorship Application (continued)

Please answer the following questions in space provided. In addition, if requesting full sponsorship please provide a copy of the most recent annual report.

1. How does the activity further recognize the University mission of education or community service?

2. How will the University be recognized for sponsoring the event, i.e. programs and/or brochures?

3. How will University personnel be involved in the planning, implementation, monitoring, and analysis of the event?

I recommend the organization listed above be approved for (full/joint – please circle one) sponsorship of the above listed event.

University Liaison/Department

Date

Dean or Department Head Approval

Date

Area Vice President or President Approval

Date

Please forward to University Scheduling Office, Memorial Union, upon final approval. Failure to process this form in a timely manner may result in denial of request.

Note: This application does not serve to confirm any facility reservations. Those reservations must be made according to standard procedure by the liaison or contact person named above.