Normandale Student Life

Program Planning Packet

Includes:
* Program Planning Tips
* Club/Organization/Group Pre-Event Program Plan
* Event Planning Checklist

When your group is planning an event this packet should be turned into Amanda Lilgreen
Questions?
Contact the Amanda Lilgreen at 952-358-8848
Stop into the Club & Org Office (K 1425, The Zone)
Program Planning Tips

✔ It is in your best interest to be attentive to any potential programming problems.

Some DETAILS TO KEEP IN MIND:

☐ Budget
☐ Crowd Control
☐ Performer Needs
☐ Timing of Event
☐ Technical details such as sound and lighting

✔ If problems arise during your event, contact your advisor or Student Life. Any problems should be noted on a program evaluation form.

✔ AT LEAST TWO WEEKS BEFORE YOUR EVENT

☐ Confirm facility reservations and set-up.
☐ Keep in mind your facility’s maximum capacity and devise a plan to handle a capacity, or over capacity, crowd.
☐ Confirm catering arrangements.
☐ Confirm payment of entertainment and their arrival time, performance time, sound checks, etc.
☐ Confirm security arrangements.
☐ Contact your advisor and request his/her presence if necessary.
☐ Meet with the scheduling office and set-up crew.
☐ Publicize your event.

✔ AT AN EVENT

☐ Either you (or a designated organization member) should serve as the main contact person for the event.
☐ The contact person must not be under the influence of alcohol or any other drug.
☐ Arrive early to check the set-up, refreshments, equipment, performer(s), etc. are correctly arranged, and to be available if any questions arise.
☐ Introduce yourself to the Building Manager, food service representative (if applicable), the entertainer/performer and others if appropriate.
☐ If problems arise, contact your advisor. If appropriate, you may also want to contact Student Life.
☐ Make sure payment arrangements are carried out. Any disagreements regarding money or services should be brought to the attention of your organization and/or advisor as soon as possible.
☐ By agreeing to take on the responsibility for planning an event, you are responsible for ensuring that the above items are followed.
Club/Organization Pre-Event Program Plan

Sponsoring Student Group(s): __________________________________________

Individual(s) responsible for coordinating event:

____________________________________________________________________
Name                        Phone                           Email
____________________________________________________________________
Name                        Phone                           Email
____________________________________________________________________
Name                        Phone                           Email

Name of the Event: __________________________________________

Date(s) of Event: __________________________________________

Location: ____________________ Start Time: _______ End Time: _______

This event is free (circle one)?    Yes or No  (If no, cost is: $_________ )

This event is open to the public (circle one)?   Yes or No

If no, the event is open to: ______________________

Does this event promote diversity (circle one)?  Yes or No

Is the event a service opportunity (circle one)?  Yes or No

If Yes please complete the service learning planning & registration forms and return to the Club & Org office, The Zone (K 1425)

(Amanda Lilgreen Amanda.lilgreen@normandale.edu)

Does this event involve an off-campus entity (circle one)?  Yes or No

If yes, who: _________________________________________________

Phone/email: ________________________________________________

Address: ____________________________________________________

*Please complete, print and return this form to The Zone Desk. We will contact you to discuss the status of your request within 72 hours.
Event Planning Checklist

____ Advisor notified and, if after regular business hours, will attend event.

Advisor Signature: ______________________ Date____________

(must be dated one week prior to event)

____ Budget available to pay for event confirmed with advisor.

____ Room reservation made with the scheduling office two weeks in advance

1. Kopp Student Center Reservations (Online, Kopp Student Center)
2. Classrooms and Meeting Rooms: Gloria Radtke, gloria.radtke@normandale.edu

____ Contracts completed with Accounting (Mary Ernst x8231 C1093) and club contracts on file with the Student Life

____ If using an off-campus entity, have all details been confirmed?

____ Security notified and/or hired as necessary (x8274 F1250)

____ ITS reservations made for equip. (contact Student Life Program Coordinator or Advisor to make these reservations)

____ Scheduled food catering with Lancer (Catering Mgr. 952-358-8614)

____ Contacted building services for room set up (x8110, http://normandale.myworksite.com)

____ Posters/flyers stamped at the Kopp Central Desk before posting

____ Marketing/Communications notified of event (Geoff Jones 952-358-8191 C1071)

____ Center for Experiential Education Planning & Registration forms (if applicable) copy provided to the Student Life Program Coordinator in the Student Life Office at least two weeks prior to event

____ Copy of advertisement and this form returned to the Student Life Program Coordinator in the Student Life Office at least two weeks prior to event

** I understand and have completed all necessary steps above, as indicated by the check marks.

(Club/Org/Group member turning in form)

Signature ___________________________________________ Date: ______________

Please return this packet to the Student Life Program Coordinator one week prior to your event, or, if you are applying for LEAD funds please turn this packet in with your LEAD fund request.

Questions? Contact Amanda, 952-358-8848, amanda.lilgreen@normandale.edu.
Club Program Evaluation

Please keep this sheet until after the program is finished and then complete this form and return to K1425.

Name of Club: __________________________________________________

Name of Program: ________________________________________________

Date: _________       Time: ____________ Location: _________________

Name and contact information for facilitator/speaker/entertainer:

Name: _________________________________________________________

Address_________________

Phone: ____________________ email: ____________________________

Budget for event: $_______________________________________________

Were you given LEAD funds for this event? Yes________ No________

If yes, in what amount? $________________________________________

How many people attended your event? ____________________________

Was your event open to the public or just your club? ________________

How did you advertise your event (please attach copies of advertisements):
________________________________________________________________
________________________________________________________________
________________________________________________________________

Would you repeat this program? ______

Why or Why Not?________________________________________________

________________________________________________________________
________________________________________________________________

Please return this form within two weeks of your program to

Amanda Lilgreen, Student Life Program Coordinator, K 1425
Advisor Commitment Form

After Regular Business Hours Event Form

Normandale Community College

I _______________________________ (your name), the advisor of ____________________________ (student club or organization), agree to be present the entire time for my group’s ____________________________ (event name) they have planned on _____________ (date) from ________ (start time: including set-up) to ________ (end time: including take-down).

As advisor I understand that this event has been scheduled after regular business hours and commit to being in attendance during the entire event listed above. I understand that if I choose to leave at any time the event will be ended by the Normandale Community College security and Bloomington Police Officers present.

________________________________________
Print Name (Advisor)

__________________________
Extension #

__________________________
Email

________________________________________
Signature (Advisor)

Please return at least one week prior to the event to Amanda Lilgreen.

SL, C & O, Adopted Fall 2005, Updated Fall 2013