



**Illini Union Board Co-Sponsorship
Information Form**

IUB PROGRAM
COUNCIL USE ONLY:
 Supported
 Denied
 Date: _____
 VPP Initial _____

*Note: This form must be presented to IUB's Program Council for board support.
Please use additional sheets if necessary*

Date: _____

Name of Organization(s) interested in Co-Sponsorship:

Contact Name: _____ Email: _____

PROPOSED EVENT INFORMATION

(Please fill out as much information as possible and use additional sheets if necessary)

Name of Event: _____

Type/Description of Event:

Event Date (if known): _____ Time: _____

Place/Location (if known): _____ Estimated Total Cost: _____

What will IUB contribute to the event?

Will you be requesting funds from IUB, if so how much? _____

Where will the remaining funds come from? _____ Organization account number _____

AGREEMENT

Please read and sign the following statement.

This request for co-sponsorship is being made to the Illini Union Board (hereafter IUB). **The organization(s) requesting this co-sponsorship understands that completing this form does not guarantee a co-sponsorship agreement will be in place with IUB until the IUB Program Council has reviewed and agreed to support the request.** Criteria for support will include: level/type of IUB involvement in the event/program; reason for requesting co-sponsorship with IUB; and need for the event on Illinois campus. If the co-sponsorship request is approved, the organization(s) will be required to complete a co-sponsorship agreement form with IUB.

Organization Representative _____ (signature) _____ (date)