School of Social Work Event Planning Worksheet

EVENT: ____________________________________________________________

EVENT DATE: _____________________ TIME: _________________________

CATEGORY/THEME: ________________________________________________

CONTACT PERSON: ___________________ PHONE: _____________________

BUDGET: _________________________________________________________

INVITATIONS:

Save the Date/Invitation transmittal (check all that apply)

Email _______ Printed Save the Date/Invitation _______ Dates to Printer _______
Letter _______ Map _______
RSVP’s _______ Date for RSVP _______ Reminder email _______

Invitation list (attach a list of names and addresses)

Alumni _______
Faculty _______
Staff _______
Presenters _______
Others: _______
Date Invitations to be Mailed _______
RSVP returned to _______________________________________________

Total Invitations to be Ordered/Mailed _______
Event Location:
Venue:_________________________________
Room Confirmation _______
Room Setup _______
Tables _______
Chairs _______
AV-Sound
PA System _______
Recording _______
Music _______
A/V Equipment _______
Lighting _______
Rentals:
Vendor_________________ Room Set up __________________________
Guest Tables _______
Registration _______
Chairs _______
Stage _______
Risers _______
Tent _______ Size _______ Location _______________
Program:
Speaker ___________________________
Title of Speaker ___________________________
Title of Speech ___________________________
Letter/Email of Invitation Mailed _______ Date: _________
Photograph speaker _________
Printed Programs _______ Date to printer___________
Gift/Memento _______ Cost: _______
Name Tags _______
Facilities:

Location __________________________ Requisition Date: ________

Contacted for building/rooms to be open ________________ Date: ________

Photographer:

____________________________________ Date contacted: ________

Flowers/Decorations:

Centerpieces
Plants
Balloons
Other: ____________________________________________

Catering:

Vendor ____________________________ (attach a list of catering order or menu)

Contract: yes/no

Breakfast (buffet or served)
Luncheon (buffet or served)
Dinner (buffet or served)
Hors d’oeuvres
Liquor (cash bar or open)
Projected Headcount

Event Staff:

Office staff
Student Volunteers
Others

Entertainment: ____________________________
Mementos/Gift Baskets

Who to Receive

Item

Cost:

Publicity:

News Release
Website
Posters
Publications
Signage for building

Parking:

Event Signage
Other
Security

Disabilities Needs:

Miscellaneous supplies needed for event:

Evaluation of event: