Patrick Henry Community College
Student Activities Event Proposal

Requestor Name: ___________________________ Ext. _________
Organization: ___________________________________________

Day of Event: _______ Date of Event: ___________ Location of Event: ___________
Time Needed (including setup): _____ Actual Start & End Time of Event: ___________
Title of Event: _________________________________________

(NOTE: Please give full title/description to be placed on Calendar of Events)

Open to the Public? □ Yes □ No
Is there Admission? □ Yes □ No Amount $ ______
Is additional Security Required? □ Yes □ No

Equipment / Supplies
□ Podium
□ Dry Erase Board

Sample Room Arrangements

Estimated Number of Participants? ___
Will you be serving food? Yes □ No □
Head Table? Yes □ No □ How Many ___

Instructional Media Services
(Requires 2-Day Notice)
□ Microphone, Hand-Held ___ # Needed
□ Microphone, Wireless ___ # Needed
□ Screen
□ Projector, Video
□ Projector, Overhead (transparencies)
□ VCR
□ DVD
□ Video Taping, Assisted (Requires 7-Day Notice)
□ Video Taping, Unassisted
□ Telephone
□ Laptop Computer

Contact:
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Total of 18 tables and 80 chairs (2-6 chairs per table)
Food Table Set-Up? Hall □ Room □
Exhibit Tables? Yes □ No □ How Many ___

□ Boardroom Style □ Horseshoe Style □ Seminar Style
- Chairs Only
- 10 Chairs per Row
□ Winged
□ Straight

□ Banquet Style
- Tables & Chairs, surrounding
- 4-6 Chairs per Table

□ Classroom Style
- Tables & Chairs, one-sided
- 2-4 Chairs per Table

Comments: ______

OFFICE USE ONLY:
CC: □ Security □ Maintenance □ Media Services Date _______ □ Events Calendar
Heat/Air Request: □ Yes □ No