



2009-2010 Late Night at Iowa Funding Application

Date Received: _____ Staff Initials: _____

SPONSOR INFORMATION

Sponsoring Organization: _____

Application Submission Date: _____

Contact Person: _____

Title/Position: _____

Phone Number: _____

E-mail Address: _____

Please list any co-sponsors and their roles/responsibilities: _____

EVENT INFORMATION

Event Title: _____

Event Date: _____

Event Time (start time and end time): _____

Event Location: _____

Expected Attendance: _____

Event Coordinator (individual responsible on site during event): _____

Have you applied for funding for this event before? Yes No

Have you already reserved this space? Yes No What is the cost for this space? \$ _____

Will there be an admission charge for this event? Yes No If yes, how much? \$ _____

If yes, how will you use the proceeds? _____

Please describe your event in detail. What is its purpose? What activities will occur at your event? What equipment will be required at the event location? Who are your target audiences? (Use reverse if necessary)

What, if any, risks are specific to the event location or to the proposed activities? (e.g., risk of physical injury, property damage) _____



It is important that participants know about late night transportation to and from the event, even if you are not providing it. Are participants expected to transport themselves to and from the event? Yes No
 If yes, how will you ensure that your attendees are aware of alternative transportation options?

If no, what transportation are you providing? _____

What current policies, if any, present barriers to this event? (e.g., location does not remain open late, location does not allow outside catering): _____

Could this event be replicated in the future, and who might be potential partners?

How is this event new and/or different from existing events? _____

How does this event appeal to a variety of students? _____

How will you market and publicize this event to potential attendees? _____

BUDGET

Item	Details – Please Describe (or attach budget sheet)	Cost
Food	_____	_____
Entertainment	_____	_____
Giveaways/Prizes	_____	_____
Advertising/Marketing	_____	_____
Decorations	_____	_____
Transportation	_____	_____
Location Rental Fee	_____	_____
Equipment/Props	_____	_____
Other (please specify)	_____	_____

TOTAL ESTIMATED EVENT COST: \$ _____

How much of the total event cost are you requesting from Late Night at Iowa? \$ _____