Event Planning Checklist
Use this basic checklist to assist your group in planning a successful event. Remember, we may not have all of the specifics that your event requires on this sheet, so brainstorm prior to starting your event planning to make sure everything gets covered!

| Name of Event:<br>Date:<br>Time: |  | ADVERTISING                 |   |  |  |  |
|----------------------------------|--|-----------------------------|---|--|--|--|
|                                  |  | Officer in charge:          |   |  |  |  |
|                                  |  | <ul><li>Postering</li></ul> |   |  |  |  |
| Location:                        |  |                             | E-mailing Listservs                                   |  |  |  |
| Event Purpose:                   |  |                             | Chalking  |  |  |  |
|                                  |  |                             | Other forms of marketing                              |  |  |  |
| BRAINS                           | STORMING   | SHOPPI                      |   |  |  |  |
|                                  | Will the event work?   |                             | n charge:   |  |  |  |
|                                  | How many people do you need to make the  |                             | Supplies needed for your event:                       |  |  |  |
|                                  | event happen?  |                             | <ul> <li>Silverware</li> </ul>                        |  |  |  |
|                                  | Does the event serve a need previously not met                                       |                             | o Plates  |  |  |  |
|                                  | on campus?   |                             | <ul> <li>Napkins</li> </ul>                           |  |  |  |
|                                  | Do we have the resources to make it happen?  |                             | o Cups  |  |  |  |
|                                  |  |                             | <ul> <li>Decorations</li> </ul>                       |  |  |  |
| BUDGETING                        |  |                             | o Cashbox   |  |  |  |
|                                  | See sample budget planning sheet (attached)  |                             | <ul> <li>Performer specific items/requests</li> </ul> |  |  |  |
|                                  |  |                             | o Other:  |  |  |  |
| SCHED                            |  |                             | <u> </u>  |  |  |  |
|                                  | n charge:<br>Talk with the appropriate room reservation office                       |                             | <u> </u>  |  |  |  |
|                                  |  |                             | •   |  |  |  |
|                                  | What size room do you need?  What kind of tech people do you have?                   | WEEK F                      | PRIOR   |  |  |  |
|                                  | What kind of tech needs do you have?  What can you effort?                           | Officer in                  | n charge:   |  |  |  |
|                                  | What can you afford?  Tentatively back a couple of dates.                            |                             | Call reservations and make sure all details are       |  |  |  |
|                                  | Tentatively book a couple of dates Call your performer or vendor (if applicable) and |                             | secured   |  |  |  |
| ч                                | schedule the performance date  |                             | Call SAO and make sure all permits have been          |  |  |  |
|                                  |  |                             | signed and are completely ready to pick up            |  |  |  |
|                                  | Call the reservation office back to confirm your date                                |                             | Call performer and make sure travel                   |  |  |  |
|                                  |  |                             | arrangements are secured                              |  |  |  |
|                                  | Schedule a meeting to go over your tech needs  |                             | Assign event shifts for group volunteers (set-up,     |  |  |  |
|                                  | and room set-up  |                             | during, take down)                                    |  |  |  |
|                                  | Schedule the travel arrangements for your  |                             | Create any programs or fliers needed at the           |  |  |  |
|                                  | performer (if necessary), including a ride to and from the airport and/or hotel      |                             | event   |  |  |  |
|                                  | Book hotels and/or make dinner reservations for                                      | DAVAE                       | EVENT.  |  |  |  |
|                                  | your performer   | DAY OF                      |   |  |  |  |
|                                  | your performer   |                             | n charge:   |  |  |  |
| PERMIT                           | S (see Student Group Handbook to determine if you                                    |                             | Pick up performer/vendor and get to performance       |  |  |  |
|                                  | of these permits for your event)   |                             | site  |  |  |  |
| Officer in                       | n charge:  |                             | Compile performer requests in dressing room           |  |  |  |
|                                  | Food Permit filled out   |                             | Arrive early for the event for set-up                 |  |  |  |
|                                  | Outdoor Space Permit filled out  |                             | Meet vendors at the event and assist with set-up      |  |  |  |
|                                  | Alcohol Permit filled out  |                             | Greet guests at the door                              |  |  |  |
|                                  | Sound Permit filled out  |                             | Have fun!   |  |  |  |
|                                  | Sanitation Permit filled out   |                             | Clean up, remember that your reservations             |  |  |  |
|                                  | Sales/fundraising permit filled out  |                             | location may have special clean up regulations        |  |  |  |
|                                  | Security Scheduled   | AFTER '                     | THE EVENT   |  |  |  |
|                                  | Film License   |                             | n charge:   |  |  |  |
| CDANT                            | S/FUNDRAISING  |                             | Send thank you notes to performers and to             |  |  |  |
|                                  | n charge:  |                             | volunteers who worked extra hard                      |  |  |  |
|                                  | If you are applying for grants, did you get your                                     |                             | Do a post-event evaluation (see example               |  |  |  |
| _                                | applications in by the deadline?   |                             | attached)   |  |  |  |
|                                  | Have you scheduled an appointment to meet with                                       |                             | Make sure to pay all bills and turn in all grant      |  |  |  |
| _                                | the grant committee?   |                             | paperwork on time!!                                   |  |  |  |
|                                  | What measures are you taking to ensure you can                                       | **5                         |   |  |  |  |
| _                                | you calling to official you duff   | °°Don                       | 't forget to keep a list of the people and the phone  |  |  |  |

pay your performer/vendors up front?

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numbers that you are contacting throughout your planning. We suggest collecting them on the back of this list\*\*

## **BUDGET PLANNING WORKSHEET**

Here is a sample worksheet to set your project budget.

| ANTICIPATED EXPENSE        | ANTICIPATED INCOME |                                 |                                    |                |
|----------------------------|--------------------|---------------------------------|------------------------------------|----------------|
| Facilities Rental          | \$                 | Admission Fees                  |                                    | \$             |
| Food                       |                    | Co-Sponsors (please list below) |                                    |                |
| Lodging                    |                    |                                 |                                    |                |
| Publicity                  |                    | Anticipated Grants Income       | _                                  |                |
| Speaker Fees / Honorariums |                    | Name of Grant                   | Amount Requested                   | Amount Awarded |
| Supplies                   |                    | Name of Grant                   | Amount Requested                   | Amount Awarded |
| Technical Support          |                    | Name of Grant  Name of Grant    | Amount Requested  Amount Requested |                |
| Travel                     |                    | Other Income                    | 7 illouit requested                |                |
| Security                   |                    |                                 |                                    |                |
| Films License or Permits   |                    |                                 |                                    |                |
| Registration fees          |                    |                                 |                                    |                |
| Other                      |                    |                                 |                                    |                |
| *TOTAL                     | \$                 | *TOTAL                          |                                    | \$             |

If your totals do not match, you may need to adjust your program accordingly.

## POST-EVENT EVALUATION

| 1.  | Did we meet our goals/objectives with this event?  |
|-----|--|
| 2.  | Did we meet our budgetary goals?   |
| 3.  | Did we have enough volunteers for the event?   |
| 4.  | What could we have done differently to make the event better/more productive?  |
| 5.  | Did we have enough advertising/PR for the event? How could we have made this better?                                     |
| 6.  | Did we execute the program in a professional manner?   |
| 7.  | Did we face any group conflict with this program? What was it? How was it resolved? What could we have done differently? |
| 8.  | Would we bring this vendor/performer in again? Was it worth it?  |
| 9.  | Would we execute a similar program in the future? What changes would we make?  |
| 10. | How does this program allow us to grow as a group, officers, and leaders? Was it a good program?                         |