Date: _____/_____/_____

**Events Worksheet**

Host: _____ Department: _____

Date(s) of Event: From _____/_____/_____ to ____/ _____/ _____ Start Time: _____

End Time: _____ Number of people in attendance: _____

Event Name: _____

Description: _____

Location: _____

Alternate Location: _____

Catering:        ❑ Coffee        ❑ Breakfast     ❑ Lunch        ❑ Dinner        ❑ Light Refreshments

Menu Details: (For menu details visit ucen.ucsb.edu/catering, please note clean up or set-up after 5:00 PM and on weekends will constitute an extra charge)

Menu for _____: _____

Menu for _____: _____

Menu for _____: _____

Menu for _____: _____

Room set-up: (i.e. round tables, classroom style, conference style, lecture style, tablecloths *Please note that taking any decorations in the set up will be charged to the host)

_____

Tech equipment

❑ Projector  ❑ Screen ❑ Podium ❑ HDMI or other cables: _____

❑ Computer     If personal computer is being used, please list the make and model:

_____

❑ Lodging required (Please send a follow up e-mail with the details of the guest (s) & check in/out dates)

Other notes: _____

Budget: $_____  ❑ Co-Sponsorships: _____

_____          _____

Other Notes:          *If you have additional budgeting or co-sponsorship details, please send them via e-mail*

_____

_____          _____

Signature                                                                          Date