

Eric Cohen Student Health Center of USC

Keck Medicine of USC

Wellness Event Sponsorship Request Form

Name: _____ Email: _____ Date: _____

Please check all that apply and answer questions 1, 2, and 3.

I am a:

- USC Staff USC Faculty USC Student ID # _____

I am requesting:

- Marketing assistance

Where would you like to advertise your event?

- ECSHC website ECSHC emails ECSHC lobby
 Other (Please describe) _____

- Monetary assistance

Please indicate the amount of monetary assistance you are requesting: _____

- Food for an event

Will this food go directly to USC Students?

- Yes No

How many people are expected to attend this event? _____

- Health Promotion Items

What kind of items are you looking to receive? _____

1. Please describe your event. Include event date.

2. How does your event promote wellness?

3. Will this event be open to all USC HSC students?

- Yes No

Please send this form to via email to ecohenshc@med.usc.edu or drop it off in person at the ECSHC. The ECSHC Operations Committee will review this request at the next monthly meeting and will notify you of the decision within 30 days.

Thank you for your submission.

Approved

Not Approved

Clarification needed