



# Residence Life Program Proposal Form

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RA: \_\_\_\_\_ Building: \_\_\_\_\_ Date: \_\_\_\_\_

Program Title: \_\_\_\_\_ Other person(s) involved: \_\_\_\_\_

Date of program: \_\_\_\_\_ Location of program: \_\_\_\_\_

Which of the following program types does this program meet? (i.e. Social, Community Service, Faculty involvement, Education, one of your own choosing)

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What are your goals for this program? \_\_\_\_\_

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Who is your intended audience? \_\_\_\_\_

How are you going to advertise to this audience? (i.e. signs, word of mouth, etc.) \_\_\_\_\_

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When will you start advertising? \_\_\_\_\_

What you need for this program to be successful? \_\_\_\_\_

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Is there anything you need from us to help you with this program? \_\_\_\_\_

- Approved
- Disapproved

AD/Supervisor's comments: \_\_\_\_\_

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Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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