

FOR APPROVED EVENTS, SUBMIT BRIEFING TO THE OFFICE OF THE PRESIDENT NO LATER THAN 2 WEEKS PRIOR OT THE EVENT

	PRESIDENTIAL BRIEFING			
EVENT NAME				
DATE OF EVENT				
TIME				
ATTIRE				
LOCATION / VENUE				
DIRECTIONS				
STAFF				
Name / Phone				
Name / Phone				
EVENT CONTACT				
Name / Title / Phone				
EVENT INFORMATION				
PURPOSE				
PRESIDENT'S ROLE AT EVENT				
ROOM SETUP (theatre, banquet tables, conference tables, classroom, etc.)				
SEATING INSTRUCTIONS FO	R PRESIDENT			
ANTICIPATED NUMBER OF A	ITENDEES			
ADDITIONAL ATTACHMENTS (Off Campus Events)				
☐ ADDITIONAL MAPS/DIREC	CTIONS			
☐ PARKING INSTRUCTIONS / SPECIAL PERMITS				
□ EVENT TICKETS/PASSES/CREDENTIALS (MUST BE PROVIDED IN ADVANCE – NO "WILL CALL")				





SUPPLEMENTAL INFORMATION			
ABOUT ORGANIZATION HOSTING EVENT			
EVENT HONOREES			
TABLE SEATING LIST			
CSUDH PRINCIPALS ATTENDING			
COODITY KINGII ALS ATTENDING			
ADDITIONAL NOTES IF NEEDED			
ADDITIONAL NOTES II NEEDED			





EVENT TIMELINE OR PROGRAM





KEY PARTICIPANTS
NAME AND TITLE
ROLE AT EVENT (honoree/awardee, speaker, table guest, donor, alumna/us, etc.)
BIO INFO
NAME AND TITLE
ROLE AT EVENT (honoree/awardee, speaker, table guest, donor, alumna/us, etc.)
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BIO INFO





PRESIDENT'S REMARKS OR SPEECH

PROGRAM CONTEXT – When / How the president participates in event (i.e., introduction, middle, keynote)		
MASTER OF CEREMONIES		
LENGTH OF PRESIDENT'S REMARKS		
SPEAKING FROM PODIUM? IF SO, LOCATION IN F	ROOM	
TYPE OF MICROPHONE		