



Request for Mission Related Event Form

College Operating Procedure 04-0601 allows for the mission related events coordinated and managed by an External User but the College or a College department(s) feels the purpose of the event and/or organization falls within the mission of the College and/or Department and will provide a benefit to the College or department. The College department may be responsible for all or a portion of the appropriate facility use and service fees as agreed upon between the College department and External User. Examples of Mission Related Events would include the following: meetings of professional organizations related to a staff member's role at the College, professional association conferences related to the staff member's role at the College, Academic Competitions that are related to a School, etc.

Credit courses provided by regionally accredited University Partners that does not conflict with the academic programming of Florida SouthWestern State College. The Vice President of Academic Affairs approves all University Partners.

Requirements:

- Event & Conference Services can work directly with the External User; however, a contact within the College must be designated in the event that additional facilities and/or services are requested by the External User.
- The Request for Mission Related Event Form must be signed by the College department, appropriate budget administrator, and the External User. Auxiliary Services will provide a recommendation to the administration on whether the event qualifies as "mission-related."
- If there are direct costs associated with an event that the college department has agreed to pay, an Event Fee Form must be signed by the appropriate budget administrator no less than five (5) business days prior to the first date of the event.
- A Facility Use Agreement signed by the External User.
- Proof of Insurance, as defined by this procedure, by the External User.
- Any other applicable documents with regards to the External User including, proof of 501(c)(3) status or Certificate of Exemption from Florida Sales and Use Tax, if applicable.
- Facility Use and Service Fees as outlined in this procedure.

Directions:

1. Reservations for the spaces and services must be made with Central Scheduling by the represented College Department or the External User. Facility and service fees will be provided by Central Scheduling.
2. The College Department must complete the additional information required on the form, obtain required signatures and send to Central Scheduling.
3. Central Scheduling will complete contracting process and work with External User.



Request for Mission Related Event Form

TO BE COMPLETED BY FLORIDA SOUTHWESTERN COLLEGE DEPARTMENT OR CENTRAL SCHEDULING:

Organization (External User): _____

Event Name: _____

Event Date(s): _____

College Department: _____ Department Contact: _____

Can the External User provide a certificate of insurance? YES NO

If not, insurance must be purchased. Insurance will be purchased by: (please check one)
External User College Department

Please attach statement outlining reason for mission related and any benefits being provided in consideration/exchange of reduced fees for review by the College President.

FEES ASSOCIATED WITH EVENT:

Facility Use Fee: \$_____ Service Fees: \$_____ Insurance Fees: \$_____ Total Fees: \$_____

REDUCED FEES REQUESTED:

College Mission Related Rate to be Applied and Paid by External User

College Mission Related Rate to be Applied and Paid by College Department

College Mission Related Rate to be Applied and portion to be paid by College Department
(\$_____), balance to be paid by External User

Facilities to be provided in exchange/consideration of benefits listed above (***Requires Vice President of Operations & College President Signature***)

Facilities and Services to be provided in exchange/consideration of benefits listed above (***Requires Vice President of Operations & College President Signature***)

College Department Index to be charged (if applicable): _____
INDEX Budget Administrator Signature

External User _____ Date _____ College Department Representative _____ Date _____

Vice President IT & Digital Strategies/
Chief Information Officer _____ Date _____ College President
(If applicable) _____ Date _____