



Intake Create Date

AFN Member

| Intake Date | EMO Member |
|-------------|------------|
|             |            |

## EVENTS MANAGEMENT OFFICE – EVENT INTAKE FORM

Please fill out this form and submit to [eventsmanagement@babson.edu](mailto:eventsmanagement@babson.edu) or designated EMO liaison for alumni events. Once the Event Intake Form is reviewed, you will receive an email or phone call from an EMO representative within 48 hours for next steps. If you have any questions regarding this intake form, please contact us at 781-239-5625.

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|--|---|
| <b>EVENT NAME (EXACTLY AS IT WILL APPEAR IN CALENDAR POSTING)</b>  |   |
|  |   |
| <b>DESIRED OUTCOME</b>   | <b>CATEGORY (A, B, C or D)</b>  |
|  |   |
| <b>CLIENT INFORMATION</b>  |   |
| Event Owner:   | Department:   |
| Email:   | Event Budget Number:  |
| Phone:   | Budget (\$):  |
| <b>EVENT INFORMATION</b>   |   |
| Day, Date  |   |
| Time   | Start Time: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM End Time: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM   |
| Staff Member on Site   | <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, ____ AFN ____ EMO  |
| Event Charge   | Is there a fee for guests to attend any part of the event? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, \$ ____ pp  |
| Event Type   | <input type="checkbox"/> US Regional <input type="checkbox"/> International <input type="checkbox"/> Affinity <input type="checkbox"/> Education/Enrichment <input type="checkbox"/> Service<br><input type="checkbox"/> Development <input type="checkbox"/> Campus/Community <input type="checkbox"/> External <input type="checkbox"/> Other _____     |
| Details (check all that apply)   | <input type="checkbox"/> Reception <input type="checkbox"/> Dinner <input type="checkbox"/> Speaker <input type="checkbox"/> Performance <input type="checkbox"/> Conference <input type="checkbox"/> Fundraiser<br><input type="checkbox"/> Social <input type="checkbox"/> Webinar (Contact CITG 1-2 months prior) <input type="checkbox"/> Other _____ |
| Location(s)  | <input type="checkbox"/> OFF Campus _____<br><input type="checkbox"/> ON Campus location<br>1 <sup>st</sup> choice _____ 2 <sup>nd</sup> choice _____<br>If ON, has space been reserved with Scheduling@babson.edu? <input type="checkbox"/> YES <input type="checkbox"/> NO  |
| Audience Type  | <input type="checkbox"/> UG Students <input type="checkbox"/> GRAD Students <input type="checkbox"/> Staff/Faculty <input type="checkbox"/> Prospective Students<br><input type="checkbox"/> Parents <input type="checkbox"/> External Audience <input type="checkbox"/> Other _____<br><input type="checkbox"/> Alumni; include geographic region: _____ |
| Estimated Size   |   |
| Event Sponsor(s)   |   |
| Photography  | <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, ____ student or ____ professional  |
| Catering Requirements  | <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please include needs<br><br>Has catering been contacted (Sodexo if on campus) <input type="checkbox"/> YES <input type="checkbox"/> NO   |
| Alcohol Service Requirements   | Will there be alcohol served at this event? <input type="checkbox"/> YES <input type="checkbox"/> NO  |
| Calendar & Registration  | <input type="checkbox"/> Event posted on Babson Calendar (Tuesdays & Thursdays)<br>By Department _____ By EMO _____<br><input type="checkbox"/> Posted on the BUZZ<br><input type="checkbox"/> Posted on Life@Babson  |
| <b>MARKETING &amp; COMMUNICATIONS PLAN (FOR USE BY ALUMNI &amp; FRIENDS NETWORK)</b>   |   |
| <input type="checkbox"/> Events Newsletter (email 2 <sup>nd</sup> Thursday of month) Date(s): _____ By: _____<br><b>CONTENT FOR NEWSLETTER DUE 1 WEEK PRIOR TO EMAIL DATE</b><br><input type="checkbox"/> Segmented email (targeted audience) Date(s): _____ By: _____<br><input type="checkbox"/> Website (request event posting) JIRA request needs to be put in By: ____ AFN ____ EMO<br><input type="checkbox"/> Print Collateral Date(s): _____ By: _____<br><input type="checkbox"/> Other, specify _____ Date(s): _____ By: _____ |   |

**CALENDAR POSTING DESCRIPTION (*EXACTLY AS IT WILL APPEAR IN CALENDAR POSTING*)**

**CALENDAR POSTING RIGHT COLUMN CONTENT (*PICTURE, ATTACHMENT, ADDITIONAL INFORMATION*)**

**INVITATION CONTENT (*EXACTLY AS IT WILL APPEAR IN INVITATION*)**

**ADDITIONAL COMMENTS**