



## THE UNIVERSITY OF LOUISIANA MONROE

### Campus Event Planning (Set-up) Checklist

Each step as outlined below, must be completed to facilitate a timely and complete Campus Event Planning set-up. The *Request for Special Set-Up* form, example attached, can be electronically accessed and completed via the ULM website, by accessing *Forms* under the *Faculty & Staff* menu. Failure to complete each step, may lead to unnecessary delays and/or incomplete event set-ups.

- \_\_\_\_\_ Prepare *Request for Special Set-Up* form at least **5 business days** in advance and submit to Physical Plant, preferably by email, to the contacts as shown at the bottom of this checklist.
- \_\_\_\_\_ Each event needs a separate *Request for Special Set-Up* form.
- \_\_\_\_\_ Provide exact location (include precise grounds location or applicable room number).
- \_\_\_\_\_ Provide the event name, date and time, including appropriate lead time.
- \_\_\_\_\_ Provide the sponsoring group name.
- \_\_\_\_\_ Provide your direct supervisor's name, and the name of the Faculty or Executive Team member to which your supervisor reports (if not your direct supervisor).
- \_\_\_\_\_ Provide the office number and mobile phone number of contact person.
- \_\_\_\_\_ Provide any specific custodial needs, including pre-event and post-event needs.
- \_\_\_\_\_ If trash cans, electricity, tables, chairs are required, specify the exact location and quantity.
- \_\_\_\_\_ If after-hours standby support is needed, provide an account number for overtime pay.
- \_\_\_\_\_ If food is served table covers must be used.
- \_\_\_\_\_ Tables cannot be used more than five days.
- \_\_\_\_\_ All *Requests for Special Set-Up* forms need prior approval, by Approving Agent, to whom

Requesting Agent reports, before submitting to Physical Plant.

#### Contacts

Mrs. Mary Murphy, Administrative Coordinator 3  
Email: [mmurphy@ulm.edu](mailto:mmurphy@ulm.edu)  
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Ms. Christie Hemphill, Office Manager  
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**ULM PHYSICAL PLANT  
REQUEST FOR SPECIAL SET-UP  
SUBMIT 5 BUSINESS DAYS IN ADVANCE**

REQUESTED BY: \_\_\_\_\_ REQUEST DATE: \_\_\_\_\_

FOR EVENT:

EVENT LOCATION (Specify Building/Room/Area)

EVENT

COORDINATOR: \_\_\_\_\_ PHONE# \_\_\_\_\_ ALT PHONE# \_\_\_\_\_

ULM SPONSORING AGENCY OR DEPT \_\_\_\_\_

**EVENT BEGINS (SETUP BEFORE)**

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

**EVENT ENDS (TAKE DOWN AFTER)**

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

**TABLES**

QTY: \_\_\_\_\_ Size: \_\_\_\_\_ Type: \_\_\_\_\_

**CHAIRS**

QTY: \_\_\_\_\_

DESCRIBE ANY SPECIAL ELECTRICAL REQUIREMENTS:

STANDBY PERSONNEL NEEDED (number and trade):

OTHER SPECIAL NEEDS OR COMMENTS:

IN THE SPACE BELOW OR ON A SEPARATE SHEET, PLEASE DIAGRAM SET-UP ARRANGEMENT, SHOWING LOCATION OF FEATURES OF ROOM OR SPACE. BE SURE TO INDICATE LOCATIONS OF ALL ELEMENTS REQUESTED ABOVE, INCLUDING SOUND SYSTEM, ELECTRICAL OUTLETS, PODIUM, CHAIRS, AND TABLES.

REQUESTING AGENT: \_\_\_\_\_ APPROVING AGENT: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_ PRINT NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_