Event Suggestion Form

Name: _____

Student ID Number: _____

The event is: ☐ on-campus   ☐ off-campus   ☐ can be either one

The event: ☐ provides food   ☐ does not provide food   ☐ can be either

Please provide a description of the event you would like to see.

_____

_____

_____

_____

_____