Please fill out this form completely and email it to iacsoa@columbia.edu. Application is due NO LESS THAN THREE (3) WEEKS PRIOR TO EVENT.

**Contact Information**
Submission Date:  
Event Coordinator Name:  
SOA Program:  
Phone: / E-mail:

**Application Information**
Student Group Name (if applicable):  
Name of Event/Panel:  
Date of Event/Panel:  
Have you reserved your venue?  
If so, what is your Venue Name/Address?  
Projected Attendance:

1) Please list the names of all students and/or faculty members involved in organizing this event, as well as their program affiliation:

2) Please describe the event, including the names of any speakers (attach additional pages if necessary). Please detail how this project will engage all School of the Arts students, and include specifics of how you will reach out to all School of the Arts students to attend the event.

3) How will the event be publicized? (Please be as specific as possible.)
4) How will IAC sponsorship be acknowledged?

5) Will the funds you receive from the IAC be supplemented by additional financial support from your program or from another source? If so, please include source, amount, and what the funds will be used to cover.

6) In the event that the IAC cannot provide funding to meet all of your needs, are you able to carry out the event with a smaller budget?

**BUDGET INFORMATION**

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<thead>
<tr>
<th>Vendor Name</th>
<th>Items To Be Purchased</th>
<th>Price</th>
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*Tip should be included for food deliveries at the time of order placement. We cannot provide cash reimbursement for tip later.

Will you be serving alcohol at this event? YES / NO

If YES, Please add $100 to your estimated expenses to pay for Columbia Alcohol Proctor(s).
Total Estimated Expense $____________

If YES, please confirm you have reviewed Columbia’s alcohol policies [http://www.essential-policies.columbia.edu/university-event-policies](http://www.essential-policies.columbia.edu/university-event-policies) and will submit an Alcohol Registration Form through UEM within ten days of your event: [http://uem.columbia.edu/statuscheckredirect](http://uem.columbia.edu/statuscheckredirect) YES / NO

Please list your Event Manager’s name and UNI (this designated student must not drink at the event). The Event Manager is responsible for overseeing coordination of an event.

__________________________________________________
Please also list your Alcohol Manager for this event. The Alcohol Manager must have read and be familiar with the University’s alcohol policy and have completed alcohol training, must be 21 years of age and not drink at the event. Alcohol training is hosted by UEM, the training schedule can be found here: http://uem.columbia.edu/student/events-alcohol-0

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Student organizations are expected to comply with all School of the Arts rules and policies regarding use of facilities, alcohol policy, non-discrimination policy, and all other School of the Arts and University policies. Policies can be found at http://www.essential-policies.columbia.edu/. Failure to abide by University policy may result in disciplinary action and deregistration of the student group.

SIGNATURE PAGE
By submitting this form, I certify that I have read the Interdisciplinary Arts Council (IAC) Funding Guidelines and Regulations and all relevant School of the Arts and University policies.

____________________________________________
Applicant Name Printed
____________________________________________
Student Group Name (If Applicable)

Please submit completed application by email to iacsoa@columbia.edu.

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