UNIVERSITY OF MONTANA
PHYLLIS J. WASHINGTON COLLEGE OF EDUCATION

College Sponsorship Event Application

Please submit application 8 weeks prior to event. Send applications to Jamie.McNally@mso.umt.edu.

Event Name: _____ Event Date: _____

Organization Name: _____

Event audience: _____ Event focus: _____

Estimated number of attendees: _____ Registration fee charged (circle yes or no) Y / N

Description of event:

_____

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Contact Person

Name: _____

Phone: _____

Email: _____

INTERNAL USE ONLY	
Approved sponsorship (Y/ N)	Reason: