



# Summer Program Planning Proposal

**Event:** Name of event

**Date:** Day of the week and date

**Time:** Time of event  
Arrival time of program participants

**Location:** Venue, building and room number or outdoor location

**Target Audience:** Current Students, Prospective Students, Alumni, Campus Faculty/Staff, Professional Organization, Community

**Purpose:** Goals and objectives of event

**Format:** Event: List basic event format (conference, lecture, meeting, panel, reading, symposium, workshop, other)  
Program: Registration Check-in, Welcome, Keynote Speaker, Break out Sessions, Closing Remarks, Special Meals, Evaluations, Etc.

**Budget Summary:** Funding Sources (Department Budget, Grants, Sponsorship), Projected Expenses, Projected Revenue (Cost per Person), Projected Profit/Loss

**Campus Contact:** Campus department hosting the event and responsibility for all expenses

**For Assistance:** Angie Gora, Summer Program Director, [agora@bemidjistate.edu](mailto:agora@bemidjistate.edu) or 218-755-2851



**BEMIDJI**  
STATE UNIVERSITY

# Summer Program Logistics & Budget

Task	Assigned To	Target Date	Date Completed	Budget	Actual	+/-
Confirm Date/ Conflicts						
Space Reservations						
Timeline						
A/V Needs						
Disability Services						
Risk Management/ Insurance/Security						
Guest Speakers						
Housing Accommodations						
Meals						
Parking						
Registration						
Advertising/Print Materials						
Volunteers						
Supplies						
Follow-up (thank you notes/evals, debrief meeting)						