



## Public Relations and Marketing / Media Support Request

Phone: (530) 938-5373 Fax: (530) 938-5570

Date Requested: \_\_\_\_\_ Due Date: \_\_\_\_\_

Project Name: \_\_\_\_\_

Name: \_\_\_\_\_ Department: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Service Requested:**

\_\_\_ Design (Design/Productions) \_\_\_ Editorial (Writing/Editing) \_\_\_ Marketing (Marketing/Advertising) \_\_\_ Photography \_\_\_ Price Quote

**Type of Job:**

**Design**

- \_\_\_ Brochure
- \_\_\_ Cover
- \_\_\_ Flyer
- \_\_\_ Newsletter
- \_\_\_ Postcard
- \_\_\_ Poster
- \_\_\_ Program
- \_\_\_ Power Point Presentation
- \_\_\_ Web Site
- \_\_\_ Other \_\_\_\_\_

**Editorial**

- \_\_\_ Feature Story
- \_\_\_ News Story
- \_\_\_ Newsletter
- \_\_\_ Press Release
- \_\_\_ Program

**Marketing**

- \_\_\_ Advertising
- \_\_\_ Marketing Plan
- \_\_\_ Event Promotion
- \_\_\_ News Promotion
- \_\_\_ Other \_\_\_\_\_

**Photography**

- \_\_\_ Class
- \_\_\_ Event
- \_\_\_ Portrait/Studio
- \_\_\_ Other \_\_\_\_\_

**Advertising Specifications:**

- |                               |                 |
|-------------------------------|-----------------|
| <b>Size</b>                   | <b>Color</b>    |
| ___ Full Page                 | ___ Black/White |
| ___ 1/2 Page                  | ___ Two-Color   |
| ___ Quarter Page              | ___ Full Color  |
| ___ Other Dimensions:         | ___ Grey Scale  |
| _____ inches (width x height) |                 |

**Event Coverage**

Event Title \_\_\_\_\_

Event Date \_\_\_\_\_

Event Time \_\_\_\_\_

Location \_\_\_\_\_

**Target Audience:**

\_\_\_ COS \_\_\_ Local Community \_\_\_ Donor \_\_\_ Alumni  
 \_\_\_ Other \_\_\_\_\_

**Media Coverage Requested:**

\_\_\_ Newspaper \_\_\_ TV \_\_\_ Radio \_\_\_ Other

For more information contact Dawnie Slabaugh,  
 COS Office of Institutional Advancement at (530)  
 938-5373 or send an email to  
[slabaugh@siskiyous.edu](mailto:slabaugh@siskiyous.edu)

**IF YOU NEED MORE ROOM, PLEASE WRITE ON  
 BACK OR USE SEPERATE SHEET OF PAPER**

<b>Name of Course / Workshop / Event:</b>			
<b>Course #:</b>	<b>CRN #:</b>	<b># of Units:</b>	<b>Registration Fee:</b>
<b>Meeting Location:</b>		<b>Days of Week Class Meets:</b>	
<b>Time of Day Class Meets:</b>		<b>Meeting Dates (Start to Finish):</b>	
<b>Pre-Registration Required:</b>		<b>If Yes, Date Required:</b>	
<b>Top 5 Reasons why Audience will be interested in this:</b>			
<b>Public Relations / Marketing Objective (examples: increase enrollment by 10% in ADJ classes, publicize new ERP program, etc.):</b>			
<b>Will there be Guest Speakers: (If yes, please provide information)</b>			
<b>Other details that make it new, unusual, or different (use back or attach copy of information):</b>			
<b>Student / Instructor Testimonial (use back or attach copy of information):</b>			
<b>Would You Like to Edit Before Distribution:</b>			
<b>Photo(s) – permission to release on file:</b>		<b>Photos Will be Provided by Requestor:</b>	<b>Need Photo Taken:</b>
<b>Contact Information to be Included in Publicity:</b>	<b>Phone:</b>	<b>Email:</b>	
<b>Budget Code</b>			

Please either copy and mail to the Office of Institutional Advancement or send email attachment to: [slabaugh@siskiyous.edu](mailto:slabaugh@siskiyous.edu)