UCSD Women’s Center Student Organization
Co-sponsorship Application

Event Contact: _____________________________  Phone/Email _______________________

Name of Student Organization: _______________________________________________________

Event Title: _____________________________  Date and Time: _______________________

Brief Description and Purpose of Event: ________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

Type of Co-sponsorship Requested:

In-kind supplies _____________________________

Photocopies: _______  Other: _____________________________
(maximum 25 copies)

Women’s Center F.A.C.E.S. Guiding Principles: The Women’s Center embraces the multiple FACES of our community and our work is grounded in the following principles: Feminism, Awareness, Community, Empowerment and Social Justice.

Please describe how this event relates to the Women’s Center Guiding Principles:
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

For office use only

Approved_________Not Approved_______Staff Signatures: _______________________

Fiscal Contact: _______________