



## SPONSORSHIP REQUEST FORM

**NOTE: THIS FORM, WITH APPROPRIATE AUTHORIZATION FROM THE DEAN OR VICE PRESIDENT, MUST ACCOMPANY THE SPONSORSHIP REQUEST, ALONG WITH ALL SUPPORTING DOCUMENTATION**

### **Administrative Divisions:**

Please complete and return, along with the sponsorship request, to Patrick O. Lindsey, Vice President, Government and Community Affairs, 4091 F/AB, or scan and email to [ak2170@wayne.edu](mailto:ak2170@wayne.edu)

### **Schools, Colleges, and other Academic Units Reporting Up to the Provost:**

Please complete and return, along with the sponsorship request, to Sharon Almeranti, Director of Business Affairs, Office of the Provost, 4099 F/AB, or scan and email to Sharon at [ac1740@wayne.edu](mailto:ac1740@wayne.edu)

Group or organization requesting sponsorship: \_\_\_\_\_

Name of Event/Purpose of Contribution: \_\_\_\_\_

Amount of Sponsorship or Donation Requested: \$ \_\_\_\_\_

1. Does the sponsorship align with the university's mission and/or strategic plan?

\_\_\_\_ Yes    \_\_\_\_ No

2. Has the university supported the event in the past?

\_\_\_\_ Yes    \_\_\_\_ No

If yes, how did the university benefit from the sponsorship? For example, branding, recruiting efforts, brought the community to campus, developed a partnership between the organization and the university.

\_\_\_\_\_  
\_\_\_\_\_

3. Does the organization support or partner with Wayne State in any way?

\_\_\_\_ Yes    \_\_\_\_ No

If yes, will the sponsorship enhance this partnership?

Briefly describe:

\_\_\_\_\_  
\_\_\_\_\_

4. Does the organization have an affiliation with Wayne State? For example, does a member of our Board of Governors, a member of the President's Cabinet, a Dean, or a member of the faculty or staff serve on the organization's board?

\_\_\_\_ Yes \_\_\_\_ No

If yes, please describe the affiliation.

-----  
-----

5. Does the organization assist the university in other ways?

\_\_\_\_ Yes \_\_\_\_ No

If yes, how?

\_\_\_\_\_  
\_\_\_\_\_

6. Do you or the university desire to establish and develop a partnership with the organization seeking support?

\_\_\_\_ Yes \_\_\_\_ No

If so, how might this partnership benefit WSU?

\_\_\_\_\_

**DEAN'S OR VICE PRESIDENT'S AUTHORIZATION (REQUIRED)**

\_\_\_\_\_  
DEAN OR VICE PRESIDENT

DATE: \_\_\_\_\_

SCHOOL/COLLEGE/DIVISION: \_\_\_\_\_

**SPONSORSHIP/DONATION APPROVAL**

APPROVED:

\_\_\_\_\_  
PATRICK O. LINDSEY, VICE PRESIDENT

DATE: \_\_\_\_\_

APPROVED:

\_\_\_\_\_  
MARK LAWRENCE KORNBLUH, PhD  
PROVOST AND SENIOR VICE PRESIDENT FOR ACADEMIC AFFAIRS

DATE: \_\_\_\_\_