



DREXEL UNIVERSITY

LeBow

College of Business

Office of Engagement
GHALL Ste. 591

Contact Information:

Full Name:

Email Address:

Phone Number:

Department:

Account to be charged:

Event Information:

Event Name:

Event Date:

Start Time:

End Time:

Expected Number of Attendees:

Audience: Students

Alumni

Faculty/Staff

External

Description of Event:

Purpose of Event:

Has this event been budgeted for?

Available Budget:

Approval:

Department Head/Budget Manager:

Date:

Anna Chrulkiewicz:

Associate Dean

Date:

Frank Linnehan, PhD:

Dean

Date: