



Mechanicsville Elementary School

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Mechanicsville, MD 20659
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Joshua Lynch
Principal

MES Event Proposal

*All event requests must be submitted using this form a minimum of **45 calendar days prior to hosting the event**, or they are subject to denial. Submitting requests without attaching the appropriate fundraiser or purchase events, or entering them into School Dude, will result in denial or a request for revision before approval.

Date of Submission: _____

Section 1: Basic Event Information

- Event Title:**
- Brief Description:** (What is it? (Why are you holding this event? What's the goal? How does it support the school's goals?))

- Target Audience:** (Check all that apply and specify)
 - Students: (list specific grades, homerooms, or all grades)

 - Staff/Faculty
 - Parents/Guardians
 - General Community
 - Other: _____

- Proposed Date(s):** (Primary & Alt) Primary: _____ Alt: _____
- Proposed Time(s):** (Start & End) _____ to _____
- Proposed Location(s):** _____
- Event Organizer(s):** _____
- If not MES Staff, list Contact Email/Phone:** _____

Section 2: Facilities Use, Funding, & Revenue

Facilities Requests

Does this event request the use of facilities beyond the school day?

No

Yes: Facilities, staff, and equipment requests are required to be entered in [School Dude](#) prior to approval.

Funding

Will you be requesting the use of school funds for event costs?

No

Yes: Complete the [Request for Purchase-Reimbursement.doc](#) and submit it with the event request.

Revenue

Will this event raise revenue?

No

Yes: Complete the [Fundraiser Permission FORM.docx](#) and submit it with the event request.

Resources Needed

What key Resources Needed: (e.g., Locations (Gym, Auditorium, etc), Tables, Specific AV, Staff Support, etc)

Section 3: Communication Plan

1. **Communication Plan:** (How will the event be promoted to the target audience and school community?)
 - School Website
 - School Newsletter/Email
 - Flyers/Posters
 - Other
 - Social Media

Section 4: Food

1. **Food/Beverages:** (Will food/drinks be served? If so, what type and who is providing/catering?)
 - No Food/Beverages
 - Yes: _____
 - Caterer/Provider: _____
 - Dietary Restrictions/Allergens Considered: Yes No (If yes, explain: _____)
2. **External Vendors/Guest Speakers:** (List any individuals or companies coming to the school for the event)
 - Name/Company: _____ Service/Role: _____
 - Name/Company: _____ Service/Role: _____
 - (Attach any relevant contracts, insurance certificates, or background check confirmations for external individuals.

Section 5: For School Use Only - Approval

Reviewer Name/Title: _____

- **Approved with notes below**

- **Needs More Information/Revision** (specify below)

- **Denied** (specify reason below)

Date of Decision: _____

Notes/Conditions/Reasons for Denial: