



Nevei Kodesh
Program Proposal Form

Program Title: _____

Date: _____ Start Time: _____ End Time: _____

Person(s) Submitting Proposal:

Name(s): _____

Contact Info: _____

Facilitator(s):

Name(s): _____

Contact Info: _____

Event Manager (person responsible for set-up/clean-up of space): _____

Brief Description of Event (Include Purpose/Objectives):

Programming Area:

Spiritual/Jewish: Educational: Tikkum Olam: Membership: Social:

Other: Explain: _____

Is this a new program: Yes No

If not a new program please include prior results (include approx. attendance, program evaluation, revenue):

Please Provide Projected Expenses to Nevei Kodesh for event/Budget Request:

Room/space rental: _____ Materials: _____ Food/Snack: _____

Setup/cleanup (paid): _____ Decorations: _____ Publicity: _____

Administrative (Processing/collecting checks, registration, etc.): _____

Equipment: _____ Other (Please explain): _____



Volunteers needed to help with event: (number of people and names, if known):

Preparation: _____

Advance Registration: _____

Transporting materials: _____

Shopping/purchasing supplies: _____

Setup/cleanup: _____ **Onsite coordination:** _____

Tickets or greeting: _____

Proposed Net Income from Event:

(Please suggest cost per person and number of people you expect would attend):

Additional Information to Be Considered:

Program Approved by:

Date:

Comments/Conditions: