

# Continuing & Professional Education Event Request Form

## ABOUT THE ORGANIZER

Name:

Date of Request:

Phone Number

E-mail Address

Affiliation with the College of Forestry

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## ABOUT THE EVENT

Event Title or Topic Area

Approximate # of Attendees

Date(s) of Event

Are these dates flexible at all?

Yes      No

Is this the first time for this event?

If not, when was the event last offered?

Yes      No

Will this be an annual event?

Has funding already been secured?

Yes      No      Maybe

Yes, and the Index # is:

No

Preferred Service Provider (Optional)

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## NEXT STEPS

1. Return this form to the CPE office in person or via e-mail at [CoFContEd@oregonstate.edu](mailto:CoFContEd@oregonstate.edu).
2. Schedule an appointment to further discuss event details.
3. Keep the CPE informed of any and all changes pertaining to the event.

***Thank you!!***