

Dining Table Tent Reservation Request

GSU Café

Campus Department or Recognized Organization:

Contact Person:

Phone Number:

Email:

What Services, programs, and/or event(s) are you promoting?

Start Date to be Advertised - Must be a Saturday (Format: MM/DD/YYYY):

Please submit completed form to tstacy99@govst.edu at least 7 days prior to the desired date for posting.

For Office Use Only:

Date Received: _____

Approved Denied

Authorized By: _____

Date: _____

Notification Sent By:

Email

Phone