****

**PROTEST, DEMONSTRATION, VIGIL REQUEST FORM**

 Students & student organizations at Hendrix College are free to examine and discuss all questions of interest to them and to express opinions publicly and privately. They should always be free to support causes by orderly means that do not disrupt the college's or community's regular and essential operation.

 If the College determines that the event requires outside security or additional public safety personnel in addition to regularly scheduled personnel, the cost of this added security will be the responsibility of the event sponsor(s).

 To appropriately accommodate and assist organizers in their proposed event, this form must be submitted at least 48 hours before the proposed event to either the Office of Student Affairs or the Department of Public Safety.

|  |  |
| --- | --- |
| **Name of Event:** |  |
| **Name of** **Sponsor (Group or Organization) of Event:** |  |
| **Name and contact information of Organizer (Person in Charge) of Event:** |  |
| **Proposed Date of Event:** |  |
| **Proposed Start and End Time of Event:** |  |
| **Proposed Location of Event:** |  |
| **Purpose / Goals of Event:** |  |
| **How will this event further the educational experience to Hendrix:** |  |
| **Speaker or Presenters:****“Please attach a short Bio or resume for each speaker”**  |  |
| **Who is the intended audience for this event?** |  |
| **What off campus organizations / people with be attending / assisting:**  |  |
| **Will amplified speakers or bullhorns be present? If so, what type and how many:**  |  |
| **Will banners, signs, or any other props be present? If so, what kind:**  |  |
| **Estimated number of attendees:** |  |

|  |
| --- |
| I understand that I am the organizer of this event and responsible for taking steps to ensure the participants' safety and ensure event space is returned to its previous condition. By signing below, you acknowledge that you understand and will follow the student handbook's policy on protest, demonstration, and vigil.  |
|  |  |
| Signature | Date |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AVP Student Affairs Approved Denied

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Director of Public Safety Approved Denied