



Web Calendar Request Form

Submit request form AT LEAST four (4) weeks prior to event.

Organization: _____

Date Requested: _____ check one: OSU NC State Both

Event Date/Time: _____ Dates of posting: From _____ To _____

Name: _____ Phone Extension: _____

CALENDAR CHOICE (please check)

- NC State Calendar
- OSU Calendar
- Both

Please enter your message and use a separate form for each message. The message is subject to change/abbreviation due to its length. Please keep your message as **brief and concise as possible**.

ADDITIONAL INFORMATION TO BE POSTED

OFFICE USE ONLY

Date Rec'd _____
Initials _____

Completed _____
Initials _____

Removed _____
Initials _____