GULF COAST CONSORTIA
Sponsorship and Co-Sponsorship of Meeting and Symposia

Sponsorship

1. The organizing committee for the event must include members from at least two institutions of the Gulf Coast Consortia (GCC) in order to request and receive sponsorship or co-sponsorship.
2. Chair of the event must be a member of the GCC.
3. The Application for GCC Sponsorship of a meeting must be completed and forwarded to the GCC office, preferably 60 days prior to the desired date of the event, for review and assessment of resources available for support.
4. The Application should include clear delineation of the mechanism by which the event will be supported and amount and/or administrative support requested from the GCC.

Responsibilities of Sponsoring Faculty

1. Oversight of the meeting must come from the Program Chair (GCC faculty member) and the organizing committee. Members from the GCC must be directly involved in the program.
2. Program content decisions must come from the program chairs or program committee and be free of any sort of bias.
3. The program content must be of high quality and integrity.
4. The program subject matter, its intent, and the philosophy of the educational activity must be consistent with the missions of the GCC.
5. Drafts of the marketing or program materials must be reviewed by the GCC office. Specific product advertisements in the marketing or program materials are prohibited because of the potential for the appearance of endorsement or bias. General company logos (not product specific) as contributors to the meeting normally would be approved.
6. The GCC Program Chair must not sign any meeting contracts with hotels, communication companies, conference service providers, or others where GCC is described as a party to the contract without providing a copy to the GCC office for review and approval (including potential consultation with legal counsel).
7. GCC support must be acknowledged.

Approved GCC OC 2/18/08
APPLICATION FOR GULF COAST CONSORTIA SPONSORSHIP
Conferences, Symposia, Events

(submit to Lisa_S.Blinn@rice.edu or fax: 713-348-4659)

Event Name: _______________________________________________________________
Date(s): __________________________________________________________________
Location: ___________________________________________________________________
Description:  ________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
Event Objectives:  ____________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

GCC Program Chair(s)
1. Name and Institution:_________________________________________________
Telephone/Email:___________________________________________________________
Administrator Name and Email:_______________________________________________
2. Name and Institution:_________________________________________________
Telephone/Email:___________________________________________________________
Administrator Name and Email:_______________________________________________

Non-GCC Sponsor(s):
1. Company/Institution:_________________________________________________
Contact Person: ____________________________________________________________
Telephone/Email:___________________________________________________________
2. Company/Institution:_________________________________________________
Contact Person: ____________________________________________________________
Telephone/Email:___________________________________________________________

Financial Support
Institution/Company responsible for funding/financial support:
1. __________________________________________________________________
2. __________________________________________________________________
Amount of financial support, if any, requested from GCC: _____________________

Administrative Support
Identify level of administrative support requested from GCC:
□ Full administrative support  □ Limited administrative support  □ Web support only  □ No support needed

Other GCC Faculty directly involved: ____________________________________________
___________________________________________________________________________

Submitted by: __________________________ Date: __________________________
GCC Staff: __________________________ Date: __________________________
Approved by: __________________________ Date: __________________________

Please attach any relevant materials such as draft program, anticipated speaker list, etc.