



**REQUEST FOR DISSEMINATION OF
LITERATURE, PUBLIC EXHIBITS, DISPLAYS
AND PRESENTATIONS**

Name of Group: _____

Date of Proposed Activity: _____ **Time of Activity:** _____
From _____ To _____
(Please use a.m. or p.m.)

Contact Person: _____
Please print.

Mailing Address: _____
Street/P.O. Box _____ City _____ State _____ Zip Code _____

Telephone No.: _____ **Email Address:** _____

Type of Activity: _____

Intended Audience: _____

Location Requested: _____

Complete description of exhibit, display, presentation, event or activity:
(Please attach copies of any materials to be distributed.)

Applicant Signature

Date

Please complete this form and return to Student Life, Building 11, CF Ocala Campus, 3001 S.W. College Road, Ocala, FL 34474-4415 or Wilton Simpson Citrus Campus, 3800 S. Lecanto Highway, Lecanto, FL 34461-9026 or Jack Wilkinson Levy Campus, 15390 N.W. Highway 19, Chiefland, FL 32626.

For office use only.	
Received by: _____	_____
Signature	Date
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
_____	_____
Signature	Date