CAMPAIGN PROPOSAL FORM

Name:		Student ID:	
Email:			
Name o	f your campaign:		

Please provide as much details as possible, or we may need to delay your proposal to gather further information.

What is the objective of your campaign?

Who is the target audience for this campaign? Why?

How will you measure the impact of your campaign?

When would you like the campaign take place?

Where will the campaign take place? (HW/UXB/AYL/Online?)

Please provide any relevant links or inspiration for the campaign:

What resources do you need? Please indicate costs where possible.

Item	Cost	Quantity	Total Cost

Please send your completed form to surepresentation@bucks.ac.uk

