



“PRESERVING THE PAST, CULTIVATING FUTURES.”

College of the
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CMN Activity Request Form

All CMN activities must be pre-approved before submitting a facility request and/or event flyer to the Executive Office. You will be notified by email of approval or denial of your activity request. If approved, attach the completed copy of this form to your facility request and/or payment request forms, if a payment is required. In-person activities must follow safety protocols to protect participants at all times including ensuring the proper use of face masks, social distancing, and hand hygiene. Mvto!

Request Date: _____

Individual/Organization: _____

Name(s) of people working event: _____

Activity Type: _____

Description of activity:

Date of event: _____ Time of event: _____

On campus

Off-campus

Number of people attending: _____

Activity Funding Source: _____

Sign & Date (Individual Requesting Activity)

Sign & Date (Supervisor)

Sign & Date (Dean of Academic Affairs)

Sign & Date (Dean of Student Affairs)

President's Initials: _____