Rev. 10/25



CAMERON UNIVERSITY 2026-2027 SAFAC EVENT REPORT

Please **type** this form and submit it electronically (pdf) to the Office of the Dean of Students via studentservices@cameron.edu within 30 days after the conclusion of your event. Include copies of all advertisements distributed and sign-in logs for this event.

Do not alter this form. Please include a separate page if you need additional space to describe your event.

Current Date:	
Sponsoring Department:	
Person Completing this Report:	
Contact Name and Phone #:	
Name of Event:	
Date and Time of Event:	
Location Event was Held:	
Headcount of Students:	
Headcount of Other Attendees:	
Total SAFAC Funds Used:	
Please describe the success of the event.	

What, if anything, would you do differently if this event were offered again? Be sure to also list	
any challenges you faced and what could have been done to avoid them.	
Dispose describes any offen action items	
Please describe any after-action items.	
What other financial resources were used to facilitate the expenses for this event? Be sure to	
list the expenses each resource covered.	