



Marketing and Media Relations Department  
**REQUEST FOR SERVICES**

VALENCIA

**CONTACT INFORMATION**

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_ Mail Code: \_\_\_\_\_  
 Dept. Name: \_\_\_\_\_ Index: \_\_\_\_\_ Fund: \_\_\_\_\_ Org: \_\_\_\_\_

**PROJECT INFORMATION**

Project Title: \_\_\_\_\_ Project Delivery Date: \_\_\_\_\_

Is project related to an event? Y  N  Name of event: \_\_\_\_\_

Please indicate the type of service you are requesting: *(check all that apply and print all required information below)*

- Consultation:** To discuss solutions to a marketing challenge or further define the scope of services required, describe the challenge below.
- Design Services:** Includes concept development, production and delivery. Please provide type of project (print, direct mail, environmental, electronic mediums), purpose of end product and quantity of finished pieces.
- Web Services:** Specify nature of request (new site development, content development/edits, graphic element, photography). Please indicate if request is related to a project already initiated with OIT staff.
- Copywriting:** Please indicate type of project (edit existing material, create message for specific audience and medium, naming conventions for specific promotions).
- Photography:** Indicate if this supports a web or print design project. For event photography include date, time, location of event and contact information for event liaison. Please explain how photos will be used.
- News Release:** Indicate resource person for facts, statements, statistics, etc. Requests for press releases should be received at least three weeks prior to an event or the desired date for release. Late requests may not meet local press deadlines for publication.
- Exact Reprint:** See section below for required information.
- Cost Estimate:** Indicate type and purpose of project. You may use reprint section below to indicate specifications.
- Other:** Indicate nature of project. Be as specific as possible.

Brief description of request: *(see above for required information)*

**REPRINT INFORMATION**

For exact reprint or reprint with minor revisions, provide the following: *(Please attach sample.)*

Quantity: \_\_\_\_\_ Qty. 2: *(optional)* \_\_\_\_\_ Qty. 3: *(optional)* \_\_\_\_\_ Finished size *(w & h)*: \_\_\_\_\_

<b>Delivery Instructions:</b> <i>(include campus, contact name and mail code)</i>	<b>Comments:</b>
---	------------------

Print form and mail to **MC 4-19**, or fax to **407-582-1327**, or attach completed PDF and email to: **mmr@valenciacc.edu**.  
 You will receive an acknowledgement when your request is logged into our system for assignment.