

Office of Community Relations  
UB Community Day – April 11<sup>th</sup>, 2015  
Project Consideration Form

**NOTE: Because of the date, we are emphasizing requests be for indoor projects if possible**

Name: (Please Print): \_\_\_\_\_ Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Organization you represent & your affiliation: \_\_\_\_\_

Organization contact information: \_\_\_\_\_

Would you be on site overseeing this project? (Please circle one)      Yes    /    No

If not, who will be (and what is their contact info)? \_\_\_\_\_

Project Name:

Project Location:

Number of Volunteers Requested to Help:

Tools Necessary for Job:

Will you be providing the tools? (Please circle one)      Yes / No

Project Summary:

Other Details:

Please return completed form for consideration to:

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