Rhodes Student Counseling Center



CAMPUS OUTREACH REQUEST

Thank you for taking on the important task of enriching the Rhodes Community! We would love explore how we can be a part of your efforts. In order to best assist you with this endeavor, please help us by filling out the following fields as a means of starting our planning process in collaborating with you. Please note that we respectfully ask that all requests be submitted 3 weeks ahead of time in order to allow us adequate time for planning.

Your Name	
Your Contact Information	
Name of Organization/Department	
Advisor (if student organization)	
Have you secured advisor approval? (if student organization)	
Date of Event	
Time of Event*	
Location of Event *	
Purpose of the Event	
Who Will Be Attending?	
What Would you like the Counseling Center to present about?	
Will there be other speakers/presenters?	

After completing this form, please send it to counseling@rhodes.edu for processing.

^{*}If these details are unknown at this time, please feel free to indicate that and we will anticipate finalization closer to the event date

^{**}Please use the back of this form if you would like to include additional content**