

Application for Permit to Chalk

Student Development & International Programs Matador Involvement Center

Requesting Organization:		Phone Number:
Person Responsible for Chalking:		Position in Organization:
Address:	City, State & Zip:	Email Address:
Date(s) Requested for Chalking:		
Describe Chalking (Be specific. Attach additional pages if necessary.) <hr/> <hr/> <hr/>		
Purpose of Chalking: <hr/> <hr/> <hr/>		
Person Responsible for Clean-up:		Phone Number:

“I have read and understand the Chalking Policy, and agree to follow the policy and procedures.”

Applicant's Signature Date

Approved by SD&IP M.I.C. Office Date