

# External Communications Worksheet (ECW)

**This form should be completed by all university and foundation departments who are corresponding with any group of alumni, donors or friends of K-State.**

INTERNAL COMMUNICATIONS/STRATEGIC SOLICITATIONS USE ONLY	
Date received _____	Solicitation tier level: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
Date reviewed _____	Event code _____
Appeal code _____	Revenue fund _____
Reason code _____	Expense fund _____
Giving page URL _____	State disclosures needed: <input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Approved by Director of Strategic Solicitations

Please complete and return a signed copy of this form along with a draft of your project to your departmental coordinator. If you have any questions, please contact Jameson Sedlacek at 785-532-7698 or jamesons@ksufoundation.org.

Please allow 10 days for processing. Incomplete requests will not be processed and may cause significant delays.

## PROJECT OVERVIEW

Main contact \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Name of project \_\_\_\_\_

Type of project (solicitation, event, giving page, contribution card, etc.) \_\_\_\_\_

Anticipated method of distribution (print mail, email, peer to peer, etc.) \_\_\_\_\_

Anticipated distribution date \_\_\_\_\_

Audience (who do you want to reach?) \_\_\_\_\_

What is the desired outcome of this project? \_\_\_\_\_

Fund for revenue \_\_\_\_\_ Fund for expenses \_\_\_\_\_  
*(If left blank, expenses will be billed back to departmental budget)*

What vendor will be used for this project? \_\_\_\_\_

## APPROVAL

Signature of Dean, Department Head or Advisor \_\_\_\_\_ Date \_\_\_\_\_

Signature of Development Officer \_\_\_\_\_ Date \_\_\_\_\_

**DATA REQUEST INFORMATION**

A new or refreshed KSUF data list is **REQUIRED** with every project request

Data request # \_\_\_\_\_

**How is criteria selected?** (geographical, alumni, specific criteria)?

- Household data  Yes  No
- Include lost and/or foreign address  Yes  No
- Alumni criteria \_\_\_\_\_

**Degree college**

- Include minors  Yes  No
- Degree department \_\_\_\_\_
- Degree year \_\_\_\_\_
- Degree type \_\_\_\_\_

**Geographical criteria**

- State \_\_\_\_\_
- City \_\_\_\_\_
- Region \_\_\_\_\_
- ZIP codes \_\_\_\_\_

**Specified criteria**

- Colleges \_\_\_\_\_
- Departments \_\_\_\_\_
- Fund numbers \_\_\_\_\_
- Donations received between specific dates \_\_\_\_\_
- Target quantity \_\_\_\_\_

**Other data information**

\_\_\_\_\_  
 \_\_\_\_\_

**PROJECT SUPPLIES**

**Contribution card**

- Quantity requested \_\_\_\_\_
- Electronic:  PDF  JPG
- Standard amounts  
 \$1,000 \$250 \$50 Other \$ \_\_\_\_\_  
 \$500 \$100 \$25
- OR —
- Amounts specified \_\_\_\_\_

**Template requested**

- Flat size \_\_\_\_\_
- Attached contribution card?  Yes  No

**Date supplies are needed** \_\_\_\_\_

**Special instructions** \_\_\_\_\_

\_\_\_\_\_

**KSUF #9 courtesy reply envelopes** Quantity \_\_\_\_\_

**Giving page**  Yes  No

*Unless otherwise noted, supplies will be ready for pickup at the KSU Foundation reception desk. KSU Foundation does not deliver supplies externally.*