



Marketing Communications PROJECT REQUEST FORM

PHONE: (478) 301-4024 • FAX: (478) 301-2684

Project # (For MC Use Only)

REQUIRED

Date Final Project Needs
to be Delivered (Not A.S.A.P.)

REQUIRED

Budget Number Required

REQUIRED

1. Job Name _____

2. Contact Person _____

Phone # _____ Fax # _____

3. Marketing Communications Contact Person:

4. Project Description: Advertisement Brochure Program/Invitation Newsletter
 Postcard HTML E-Mail Other

5. Special Instructions:

6. Quantity _____

7. Is photography required? Yes No

If yes, provide images or fill out a **Photo Request Form** and submit to Janet Crocker to arrange for a photographer.

8. Is copywriting required? Yes No If yes, who is the copywriter? _____

9. Number of Colors: Full Color Black and White 2 color (list specific colors): _____

10. Will there be mailhouse needs? Yes No If yes, contact Janet Crocker to complete a **Mail Service Form**.

No Indicia (using 1st Class stamps) 1st Class Indicia (minimum of 200) 3rd Class Indicia

11. Delivery Information:

Name _____ Phone # _____

Address _____

**Return completed Project Request Form and any supporting materials (artwork or copy)
to your Marketing Communications contact person
or Janet Crocker at crocker_jh@mercer.edu or FAX: (478) 301-2684.**