

ADVERTISING REQUEST FORM

NOTE: Please allow sufficient time for your Advertising Request Form to complete the necessary review/approval process.

INSTRUCTIONS: The Requesting Dept. or its designated liaison completes the following sections prior to submitting for approval. The Vice President/Dean must review and approve Ad Request(s). University Communications' Media Buying Agent receives the Request, prepares ad(s) for media placement, completes cost information, and signs off. The prepared ad(s) and completed Request Form copy are forwarded back to the Requesting Dept. Liaison for final review and approval sign off in order to proceed with media placement(s).

The following sections should be completed by Requesting Dept. Please attach/provide finalized, approved copy.

TODAY'S DATE: _____ LIAISON CONTACT: _____

SCHOOL/DEPT: _____ TEL. #: _____ FAX: _____

PROJECT/AD TITLE: _____

WHAT IS THE PURPOSE OF THIS ADVERTISEMENT (CHECK ALL THAT MAY APPLY):

- | | | |
|--|--|--|
| <input type="checkbox"/> UNDERGRAD RECRUITMENT | <input type="checkbox"/> IMAGE ENHANCEMENT | <input type="checkbox"/> GRAD RECRUITMENT |
| <input type="checkbox"/> EVENT-ORIENTED | <input type="checkbox"/> FUNDRAISING | <input type="checkbox"/> PROMOTE COMMUNITY RELATIONS |
| <input type="checkbox"/> PUBLIC INFO. | <input type="checkbox"/> OTHER: (DESCRIBE) _____ | |

WHO IS THE PRIMARY TARGET AUDIENCE: (CHECK ALL THAT MAY APPLY)

- | | | |
|--|---|--|
| <input type="checkbox"/> H.S. STUDENTS | <input type="checkbox"/> PARENTS | <input type="checkbox"/> POTENTIAL GRAD STUDENTS |
| <input type="checkbox"/> TRANSFERS | <input type="checkbox"/> POTENTIAL DONORS | <input type="checkbox"/> BUSINESS COMMUNITY |
| <input type="checkbox"/> ACADEMIC COMMUNITY | <input type="checkbox"/> SCIENTIFIC COMMUNITY | <input type="checkbox"/> GENERAL POPULATION |
| <input type="checkbox"/> OTHER: (DESCRIBE) _____ | | |

FINAL, APPROVED AD COPY PROVIDED/ATTACHED:

- | | | |
|---|--|---|
| <input type="checkbox"/> PREVIOUS/SIMILAR AD ATTACHED W/REVISIONS NOTED | <input type="checkbox"/> WORD DISK W/HARDCOPY | <input type="checkbox"/> VIA E-MAIL _____ |
| <input type="checkbox"/> REFER TO LAYOUT CONCEPT | <input type="checkbox"/> REFER TO THIRD-PARTY INSERTION FORM/PROPOSAL LETTER | |

O.K. TO INCORPORATE PHOTOS/GRAPHIC IMAGES YES NO OR KEEP AS ALL TEXT FORMAT YES NO

SIZE PREFERENCE: 1/4 PAGE 1/2 PAGE FULL PAGE USE OUR DISCRETION OTHER: _____

NEWSPAPER	SPECIFY SECTION	DESIRED INSERTION DATE(S)	COST(S)*
<input type="checkbox"/> THE STAR LEDGER			
<input type="checkbox"/> NEW YORK TIMES			
<input type="checkbox"/> MORRIS DAILY RECORD			
<input type="checkbox"/> BERGEN RECORD			
<input type="checkbox"/> ASBURY PARK PRESS			
<input type="checkbox"/> BRIDGEWATER COURIER NEWS			
<input type="checkbox"/> PHILADELPHIA INQUIRER			
<input type="checkbox"/> ATLANTIC CITY PRESS			
<input type="checkbox"/> BURLINGTON CTY TIMES			
<input type="checkbox"/> COURIER POST			
<input type="checkbox"/> TRENTON TIMES			
<input type="checkbox"/> TRENTONIAN			
<input type="checkbox"/> CHRONICLE OF HIGHER EDUCATION			
<input type="checkbox"/> OTHER:			
<input type="checkbox"/> OTHER:			
<input type="checkbox"/> OTHER:			
<input type="checkbox"/> OTHER:			

*COST(S) WILL BE PROVIDED BY COMMUNICATIONS

THIS REQUEST PART OF APPROVED PRIORITIES PLAN YES NO BUDGET AVAILABLE YES NO

SOURCE OF FUNDS—DEPT./ACCOUNT TO BE CHARGED*: _____ UPS ACCT.# REQ.:* _____

VICE PRES./DEAN APPROVAL _____ DATE: _____

DEPT. APPROVAL: _____ DATE: _____

APPROVAL TO PROCEED RECEIVED: _____ SIGNATURE: _____