

Southern University Agricultural Land-Grant Campus
Office of Communications Services
Social Media Request Form

Date of Request: _____

Please provide all the required information and return this form to the Director of the Office of Communications. The request should be submitted 7 days prior to social media site set-up.

Your Name: _____ **Email:** _____

Social media site you are requesting: (Select all that apply) ___ Facebook ___ Twitter ___ Instagram

Requested date to post new site: _____

User Name(s) or Handle(s): _____

Site Password(s): _____

1. Provide a brief statement of why the site is required and how it will advance the mission of our organization:

2. Provide a description or sample of the content you will be hosting on the social site:

3. Name of authorized users to maintain and update the site: _____

4. Details you want listed on social media profile (Name, Phone number, Web Address, Email, etc.):

FOR OFFICE OF COMMUNICATIONS USE ONLY:

Approval by Vice Chancellor or Associate Dean Initial: _____ Date: _____

Approved by Chancellor/Dean Initial: _____ Date: _____

Approved by Technology/Communications Director Initial: _____ Date: _____

Site Created and Password Set Initial: _____ Date: _____

Inventoried Initial: _____ Date: _____