#  Office of Strategic Communication

## University Social Media Account

## Request Form

**Application Instructions:** Before completing this request form, please review the social media overview and guidelines. University Social Media Accounts must have responsible departmental, or unit administrators assigned, to include the social media manager as an administrator on the account and designate Joy Cook and/or Morgan Osley as a page administrator on all official university social media accounts.

**Please fill out the section below and provide the requested information.** Submit the form once completed via email to jcook15@uncfsu.edu and mosley@uncfsu.edu.  Once the social media account request form has been reviewed and approved, please forward the link to the established social media account page or URL address via email to jcook15@uncfsu.edu and mosley@uncfsu.edu for final review and for our records.

Failure to complete this request form or to submit your written request via email may result in disapproval/removal of social media account.

**Note:** **If a social media account was established and published, prior to completion and approval of the university social media account request form or submission of written request via email. Please complete the university social media account request form and indicate the following: social media account was created prior to Office of Strategic Communication review and approval, in the comment section.**

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| --- |
| Requestor Information |
| First Name: |  |
| Last Name:  |  |
| Requesting Department/unit or Student Club/Organization: |  |
| Email Address: |  |
| Phone: |  |
| Requesting Date: | Click here to enter a date. |
| Organizational Category: | Choose an item. |
| Identify the Objectives of social media account: |  |
|  |
|  |
| Target Audience(Please Specify):  |  |
| Choose an item. |
| Click here to specify |
| Audience Categories(Please Specify):  | Choose an item.Click here to specify |
| Social Media Platform(Please Specify): | Choose an item.Click here to specify |
| Site Creator First Name: |  |
| Site Creator Last Name: |  |
| Site Administrator First Name: |  |
| Site Administrator Last Name: |  |
| Frequency of Site Posts and Updates (Please Specify): | Choose an item.Click here to specify |
| Projected Site Launch Date: | Click here to enter a date. |
| Content Type: | Choose an item. |
| Measuring Success Timeline and Techniques: |  |
| Comments: |  |
| Special Instructions: |  |

Email completed form to: jcook15@uncfsu.edu and mosley@uncfsu.edu . For more information or for questions and concerns, please contact the Office of Strategic Communication at 910-672-1609.