

UNIVERSITY OF PIKEVILLE

KENTUCKY COLLEGE OF OPTOMETRY

OFFICE OF STUDENT AFFAIRS

University Logo/Branding Use Request Form

Please Return Form to the KYCO Student Affairs Office in Health Professionals Building . This form should be submitted at least two (2) weeks prior to event/activity.

Club Name: _____

Person Requesting: _____

Phone Number: _____

Email: _____

DATE: ____/____/____

Reason For Request: _____

Project Description: _____

Please Submit Project Images With Form.