



Social Media Account Request Form

Date: _____

Recommended Name of the Account: _____

Social Media Platform(s) Requested:

Facebook Twitter Instagram YouTube Other: _____

Person requesting account: _____

Who will manage account? _____

Type of Account: College Account Student Club/Organization Account

Purpose of account:

Objectives/Goals:

Who is your target audience? _____

What kind of content will you share? _____

How often will you post content to the account? _____

For Office Use Only

Approved Not Approved

Account Name: _____ Date Created: _____