

**Gatekeeper Request Form – Advertising**

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| **Full name:** |  |
| **Institution:** |  |
| **Position:**  |  |
| **Email address:** |  |
| **Phone number:** | Business: Mobile:  |

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|  |
| **Title of event/item** |  |
| **Purpose of request** |  [ ]  distribute information about an education event of interest [ ]  Other, please specify:  |
| **Website (if applicable):**   |  |
| **Please outline details of request**  |
| **Please attach relevant documentation** |
| **Has this event been approved by a professional body?**  |
| **Preferred distribution method**[ ]  Please place on the AusACPDM website in the most relevant section, including a “news” item on the home page *Please indicate what date message should be removed from the website:* [ ]  Please include this message in the next quarterly AusACPDM newsletter[ ]  Due to time constraints this message would require a stand-alone email, sent in a specific timeframe *(please specify)*  |
| **Would you like this promoted on Twitter?** | [ ]  Yes | **Please include any twitter handles (e.g. @AucASCPM) or relevant #’s to include within the tweet:** |
| [ ]  No |
| **Preferred distribution messaging:**[ ]  AusACPDM communications team may adapt the messaging and include the relevant information and links.[ ]  Due to constraints the messages must be distributed exactly as written. |

**Acknowledgements:**

[ ]  Information will be distributed to members electronically.

[ ]  The communication will be distributed once only to members.

[ ]  If information needs to be distributed more than once, for example a reminder, this should be completed on a separate request.

[ ]  For event advertising only: The AusACPDM does not endorse any information presented at this event.

*All gatekeeper requests must be approved by the Website and Professional Development Committee of the AusACPDM. The AusACPDM reserves the right to decline a gatekeeper request if it does not fall within the guidelines for appropriate member communication.*

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| **For office use only** |
| **Name of reviewer:**  |  |
| **Approved by professional body?** | [ ]  Yes [ ]  No | Comments: |
| **All conditions acknowledged** | [ ]  Yes [ ]  No  | Comments: |
| **Suitable for AusACPDM members** | [ ]  Yes [ ]  No | Comments: |
| Specific subgroup:  |
| **Approval to place on website** | [ ]  Yes [ ]  No |   |
| **Approval to send to members** | Standalone email [ ]  | Include in newsletter [ ]  |
| Message adapted [ ]  | Message sent as is [ ]  |
| [ ]  **Request approved** | [ ]  **Request denied** | [ ]  **More information sought** |
| **Notes:**  |