



MARKETPLACE uSTORE REQUEST

REQUESTOR / STORE CONTACT INFORMATION

Today's Date:	Primary Store Owner	Secondary, if applicable
Name (First, MNI, Last)		
Telephone Number		
Email Address		
Division and Department		
Division and College		

STORE REPORT GENERATION ACCESS:

	Primary Report Person	Secondary Report Person
J-Number		
Last Name		
First Name		
Middle Name or Initial		
Email Address		

STORE SETUP INFORMATION (Include photographs only if individual(s) signed a participatory photo release form or you have written permission to use photos for marketing purposes)

Store Name (≤ 35 chars):	
Purpose (ex., conference)	
Event Title	
Venue (include address)	
Event Fee/Registration Fee	/
Registration Start/End Date	/
Event Start/End Date	/
Grade Range for Clients	
Age Range for Clients	
Valid Website Address	

ADDITIONAL SETUP INFORMATION

Requested Go-Live Date	
Open Registration (Everyone)	Yes No Other, explain:
Summer Camp Category, if applicable	Academics/Arts Activities STEM Programs K-12 Sports-Specific Camp Professional Development Camp for Teachers Other, list:
Capacity (maximum number)	
Capacity Message (when capacity is reached)	
Event Description	
Store Refund Policy (≤260 characters; include phone number or email address)	

INFORMATION COLLECTION: check information needed; choose required or optional for each

Participant's Name (Last, First, Middle Name or Initial)	Required	Optional
Other, list and indicate required or optional:		
Parent/Guardian's Name, if applicable (Last, First, MNI)	Required	Optional
Other, list and indicate required or optional:		
Participant's Address (Street, City, State, Zip Code)	Required	Optional
Other, list and indicate required or optional:		
Emergency Contact (Telephone and email address)	Required	Optional
Other, list and indicate required or optional:		

Notes:

1. Email the completed form to the marketplace@jsums.edu.
2. Run your Marketplace report every day after your store goes live in production. When someone registers for your event, check your Banner account the next day to ensure the amount paid in Marketplace is in your account. If it is not, notify the Marketplace representatives in the Business Office and Information Technology immediately.

REQUESTOR'S BANNER ACCOUNT

Fund	Organization	Account	Program	Detail Code
Requestor's Signature:				

DIVISION OF BUSINESS AND FINANCE (ACCOUNT VERIFICATION)

Fund	Organization	Account	Program	Detail Code
Signature: Marketplace Representative (Business Office):				

DIVISION OF INFORMATION TECHNOLOGY

Approval Status:	Yes	No	Date of Approval/Denial:
Signature: Marketplace Representative (Information Technology)			
Projected Test Build Completion Date:			
Projected Test Completion Date:			
Projected Production Go-Live Date:			