

Logo Request Form

Please complete by identifying projects requiring marketing, editorial, graphic and/or video or podcast assistance. Deliver the completed form to the Georgia District Office, Georgia@SBA.gov Along with the completed form, submit the text/content via a digital file; presentation must be final, vetted and approved prior to submission.

Project Name: _____

Requesting Business: _____

Services Requested: Presentation Marketing Video Web

Request Date: _____ Completion **Deadline:** _____

Contact Name: _____ Telephone Number: _____

(Note: if the project involves a paid placement, approval must be acquired. If the project involves a contract or co-sponsorship, the agreement/contract number and appropriate disclaimer must accompany the submitted copy).

Audience: Public Field Offices Govt. Agencies Resource Partner

Please select the logo that is being used from the list below:

Black and White SBA outlined logo and black signature



Black and White SBA outlined logo and white signature



Color SBA black logo and black signature



Color SBA outlined logo and black signature



Color SBA outlined logo and white signature



Black and White SBA outlined logo



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Color SBA black logo



Color SBA outlined logo



Project Purpose/Description/Specifications:

Georgia District Office Review & Approval (Official Use):

1. Does the following disclaimer accompany SBA's logo (SBA's participation or support is not an endorsement of any products, service or entity)
 Yes No
2. SBA's logo does not imply an endorsement
 Yes No
3. Does the presentation promotes SBA, its programs, activities or services
 Yes No
4. The logo is original and unaltered (except for its size)
 Yes No
5. Use does not imply an endorsement
 Yes No
6. Use will not embarrass or reflect negatively on the agency
 Yes No
7. Does the SBA's logo appear in a clearly distinguished section of a program
 Yes No

Approved:

Name/Title/Date: _____

Approved with revisions (attach a document with specific revisions required)

Name/Title/Date: _____

Revise and re-submit for approved revisions (attach a document with specific revisions required)

Name/Title/Date: _____

Comments: