



Clinton County Michigan

Social Media Request Form

Submit the completed form to a member of the Technology Team for review. The team includes Craig Thelen, Craig Longnecker, Deb Hebler and Ryan Wood.

Contact for Questions:
Craig Thelen - thelenc@clinton-county.org

Requesting Office

Date of Request

Contact Name

Contact Email

Contact Title

Contact Phone

Select the type of social media account that you are requesting:

YouTube

Flickr

Slideshare

Other Social Media
(Specify)

Facebook

Twitter

Video Stream

Provide a description of the social media project, to include the target audience and anticipated content / areas of discussion. Include examples of other local governments social media use similar to your request, if available.

Discuss the ways in which the social media project promotes the County's mission, advances a County priority, and/or addresses a public need.

List the names and titles of the employee(s) who will be responsible for the **daily monitoring** of the social media account. Check whether the employee will post information.

Name	<input type="text"/>	Title	<input type="text"/>	<input type="radio"/>	Yes	<input type="radio"/>	No
Name	<input type="text"/>	Title	<input type="text"/>	<input type="radio"/>	Yes	<input type="radio"/>	No

List the names and titles of employees not listed above, who will have access to the social media account. Check whether the employee will post information.

Name	<input type="text"/>	Title	<input type="text"/>	<input type="radio"/>	Yes	<input type="radio"/>	No
Name	<input type="text"/>	Title	<input type="text"/>	<input type="radio"/>	Yes	<input type="radio"/>	No
Name	<input type="text"/>	Title	<input type="text"/>	<input type="radio"/>	Yes	<input type="radio"/>	No

Discuss the risks of the social media project and the proposed strategies for mitigating the risks, to include a plan for content approval. Please list pros/cons of allowing comments/replies to your department page.

Specify your options/needs for training of involved staff in the development and daily use of your department's social media site.

Discuss the impact on the program or office if the social media project is denied.

Social Media Request Approval Sheet

Project Approved

Yes No

MIS Staff
Signature

Date

Notes

Project Approved

Yes No

County
Administrator
Signature

Date

Notes