

Room Request Form

Requestor's Information

Name: _____

Organization: _____

Phone: _____

Address: _____

Reservation Information

Date: _____

Time: _____

Purpose: _____

Number of Occupants: _____

Room Preference: (check one)

- | | |
|--|---|
| <input type="checkbox"/> RM 101 – Glorietta (35) | <input type="checkbox"/> RM 102 – Computer Lab (25) |
| <input type="checkbox"/> RM 103 – Multi Purpose (25) | <input type="checkbox"/> RM 104 – Distance Learning |
| <input type="checkbox"/> RM 121 – Science Lab (20) | <input type="checkbox"/> RM 122 – Industrial Technology |
| <input type="checkbox"/> Conference Room (15) | <input type="checkbox"/> Seminar Room |
| <input type="checkbox"/> Student Lounge (25) | <input type="checkbox"/> Patio (35+) |

Needs: (Check one)

- | | |
|--|--|
| <input type="checkbox"/> Projector | <input type="checkbox"/> Presenter's Computer |
| <input type="checkbox"/> Participant Computers | <input type="checkbox"/> VHS / DVD Player |
| <input type="checkbox"/> Smart Board | <input type="checkbox"/> Cable Television |
| <input type="checkbox"/> Extra Tables (quantity _____) | <input type="checkbox"/> Extra Chairs (quantity _____) |
| <input type="checkbox"/> Food Service (Snacks) | <input type="checkbox"/> Drink Service (Coffee, Soda, Water) |

Special Instructions:

Requestor _____ Date _____

Approved _____ Date _____