

2011 Room Reservation SCHEDULING REQUEST FORM

IF YOU HAVE ANY QUESTIONS PLEASE CALL THE ROOM RESERVATION SCHEDULER @ (916) 733-6350.

Today's Date Received :		
REQUESTOR INFORMATION		
Requestor's Last Name: First:	Facility: SLD MS	SJ □ MGH ⊠
	MHF □ DE	00 MTH 00
Department: Title:		
Email Address:	Work Phone #:	Pager/ Other Phone #:
		()
EVENT INFORMATION		
(There are two ways to reserve REPETITIVE dates, complete <u>ONLY</u> one option, either [Global] or [Block] <u>NOT</u> both.)		
1. GLOBAL: If your meetings will always fall on the same day of the month. (Example: 1 st Friday of every month.)		
DAY OF THE WEEK: SUN ☐	1ON ☐ TUE ☐ WED ☐	THU ☐ FRI ☐ SAT ☒
WEEK OF THE MONTH: FIRST ⊠	SECOND ⊠ THIRD ⊠ FC	OURTH ⊠ LAST ⊠
2. BLOCK: If your meetings will have specific days of the month. (Example: January 3, June 17, etc.)		
JAN FEB 1	MAR APR MA	Y JUN
JUL AUG	SEP OCT NO	V DEC
ONE-TIME: If you have a meeting that is NON-REPETITIVE meaning one-time ONLY and/or single request.		
MONTH DAY YEAR		
Event type: Meeting ⊠ Class □	Event Name/ Title:	
Training ☐ Other ☐ Debtors Anonymous		
Event Start Time: End Time:	Set-Up Start Time:	Clean-Up End Time:
11:00 am 12:00 pm	10:30 am	12:15 pm
	n Preference # 2: Nu h Auditorium 25	umber of Attendees:
Room Set-Up/ Seating Style: (If selecting "Special" please submit diagram showing desired room layout.)		
Boardroom ☐ Classroom ☐	Round Tables ☐ Theater ☐ L	J-Shape ☐ "Special" ☐
EQUIPMENT NEEDED		
Flip Chart/ Stand ☐ LCD Projector (for use w/laptop) ☐ Overhead Projector ☐ Slide Projector ☐		
Video Projector □ ½" VCR (VHS) □ DVD Player □ Microphone □ Podium □		
Other:		
STRATEGIC LEARNING DEVELOPMENT USE ONLY		
Date Completed: Date Confirmation Sent: Event #:		
Date Completea: Date		