SPACE REQUEST FORM - COLLINS LIVING LEARNING CENTER

To ensure consideration, the front of this form must be completed in full and submitted to the Collins Duty Office at least 7 days prior to the event.

Please plan to attend the Community Council meeting at which your request will be reviewed. If you cannot attend, please attach a complete description of your event.

1. Title and Sponsorship

Today’s Date: __________________________
Title of Event: __________________________
Estimated Attendance: ____________________
Sponsoring Organization: __________________
Person Responsible: ______________________
Phone: ___________________ Email: __________

If not a Collins Group:
Advisor’s Name: ________________________
Advisor’s Phone: ________________________
Advisor’s Email: ________________________

2. My Event is on:

Date(s): _____________________________
Day(s) of the week: ______________________
My Event begins at: ___________ am ___________ pm
My Event ends at: ___________ am ___________ pm
Set-up starts at: ___________ am ___________ pm
Clean-up finished by: ___________ am ___________ pm

3. Location Request (indicate 1st and 2nd choice):

Large  ______Coffeehouse*  
______Edmondson Formal Lounge  
______Edmondson Basement Classroom  
______Courtyard*  
______Dining Hall* (SPECIAL REQUEST)
Medium ______Cravens B Classroom  
______Cravens C Classroom  
______Collins Cinema  
______Collins Library (SPECIAL REQUEST)
Small  ______Conference Room  
______Other________________________

*Public events must take place in one of these

4. Type of Event:

_____meeting/discussion group
_____performance
_____film showing
_____class/workshop/lecture
_____recreation
_____ADVERTISING ONLY – NO SPACE NEEDED.
_____other________________________

5. Additional Requests

Admission fees may not be charged for any event taking place at Collins.

_____I wish to collect monetary donations.
_____I wish to collect non-monetary donations.
_____I am going to use decorations:

_____I would like to chalk in the Collins Courtyard. Note: Chalking is allowed only on cement walkways. No chalking within 10 feet of any building, limestone, or anywhere on the steps or veranda. Chalk must be removed with water within 24 hours after the event is over. If Collins custodial staff needs to remove chalk, you may be charged a fine.

_____I would like to hang a banner in the Edmondson Lobby for 24 hours.

_____I would like to have an info table outside the Dining Hall. Note: Limited to 2 per week per group/event. No active solicitation, please. Return table and chair to Coffeehouse when done.

_____I would like to place table tents in the Dining Hall for one day (indicate date above). Note: Table tents can only be used for Collins events).

Special Equipment: Attached an Event Tech Request Form to this sheet if you need any of the following: TV, DVD Player, VCR, projector, screen, sound equipment.

Food Service Request: If you would like to request food or drinks from Dining Services, please contact the Collins Dining Hall Manager.

Room/space must be tidy and all furniture must be returned to its original position when your event is over. If the Collins custodial staff needs to clean up or move furniture back, you may be charged a fee.

My signature:

________________________________________
Date: __________________________

Signature indicates knowledge of and an agreement to comply with Residence Hall and University policies and procedures as well as with state laws.
OFFICE USE ONLY

Special Conditions:

Public gatherings, large social events, outdoor activities, fund raisers, and certain other events require additional authorization from the Student Activities Office or the Division of Residential Programs and Services and may require security arrangements.

Authorization Needed:  ____Yes  ____No

Security Needed:  ____Yes  ____No

Security Arranged (date):______________________________

Student Activities Approval By:________________________

Approval:

Approved by:  ____Residence Manager  Denied by:  ____Residence Manager

  ____Dining Hall Manager  Denied by:  ____Dining Hall Manager

  ____Library Supervisor  Denied by:  ____Library Supervisor

Comments, changes, restrictions, or reason for denial of request:
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Name (print):____________________________________
Signature:_______________________________________ Date:____________________