STUDENT/FACULTY/STAFF SPACE REQUEST FORM
HOSTOS COMMUNITY COLLEGE/CUNY

(Before completing this form, see attached Guidelines for the allocation and use of space for public events)

Sponsor: __________________________ Name of Organization Requesting Space __________________________ Date Request Submitted __________________________

Name of Event: __________________________ Date of Event: __________________________

Set-up Time: ____________ Begin Time: ____________ End Time: ____________ Contact Person: __________________________

Address: __________________________ Phone: __________________________ Fax: __________________________

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I. IN 20 WORDS OR LESS DESCRIBE ALL ACTIVITIES TAKING PLACE IN THE REQUESTED LOCATIONS (INCLUDE EXPECTED NUMBER OF PARTICIPANTS):

II. SPACE REQUESTED (See Guidelines for complete descriptions and capacity requirements):

☐ Main Theater  ☐ Repertory Theatre  ☐ C-Lobby  ☐ Room C-391  ☐ Room C-390 (Student Lounge)  ☐ C-Cafeteria

☐ Savoy Multi-Purpose  ☐ Main Gym  ☐ A-Atrium  ☐ Bridge  ☐ Art Gallery  ☐ Other _______

III. LIST SPEAKERS/DISCUSSIONS/PERFORMERS/ENTERTAINERS FROM OUTSIDE HOSTOS COMMUNITY INVOLVED IN THE EVENT.

IV. EVENT OPEN TO: ☐ College Community  ☐ Guests of College Community  ☐ Public

V. AUDIO/VISUAL SERVICES (Indicate all equipment needed for event):

☐ Cassette Recorder  ☐ Podium with microphone  ☐ Podium Only  ☐ Monitor with VCR  ☐ Screen

☐ Overhead Projector  ☐ Video Projector  ☐ Slide Projector  ☐ Other _______

VI. BUILDINGS & GROUNDS/FACILITIES (Indicate quantity of items needed for event):

☐ Folding Chairs ______  ☐ Tablet Chairs ______  ☐ Tables 6' ______  ☐ Tables 8' ______

☐ Coat Racks ______  ☐ Blackboards ______  ☐ Other ______

VII. WILL THIS EVENT BE CATERED? ☐ Yes  ☐ No If yes, describe extent of catering (It is important that you read the guidelines before making arrangements with the campus cafeteria).

VIII. MEDIA COVERAGE: Press ______  ☐ TV ______  ☐ Radio ______

IX. WILL VENDORS BE INVOLVED IN PROJECT? ☐ Yes  ☐ No Location: ______

Faculty/Staff Advisor Agreement: As Faculty/Staff Advisor to the above mentioned Hostos Club/Student Organization, I will be in attendance at the event detailed herein from its onset and throughout its duration. I UNDERSTAND AND AGREE TO THE FOLLOWING:

- Music must be terminated at 10:00pm. The area must be vacated of all attendees by 10:30pm, and cleaned up and closed by 11:00pm.

- I must assist the Hostos Student Organization President with reporting all financial and other event-related information to the Director of Student Activities within five (5) days of the event.

The signature below acknowledges my willingness to cooperate with and ensure the proper and successful planning and implementation of the event listed herein for this organization.

Faculty/Staff Advisor: __________________________ Date: __________________________

Your Divisional Dean must review this proposal and if he/she recommends approval, do so by signing and dating below.

Divisional Dean: __________________________ Date: __________________________

For Office Use Only:

Review Date: __________________________ Review Notes: __________________________