

## REQUEST/PERMIT FOR USE OF THE CROGHAN-SCHENLEY ROOM 156 CATHEDRAL OF LEARNING

This form must be submitted two weeks in advance to the Nationality Rooms Program, 157 Cathedral of Learning

Name of Individual Making Request \_\_\_\_\_ Date of Request \_\_\_\_\_ Phone \_\_\_\_\_

Individual's Address \_\_\_\_\_ Date(s) Wanted (Month/Date(s)/Year) \_\_\_\_\_

Sponsoring Organization (Official University Host) \_\_\_\_\_ Time Wanted (Start & Finish) \_\_\_\_\_

Purpose of Event \_\_\_\_\_ Estimated Attendance \_\_\_\_\_

SET UP:  **AS IS** (center table with 24 surrounding chairs)  **OTHER**

Describe proposed set up: \_\_\_\_\_

(Attach sheet with sketch if necessary)

Refreshments will be served (must use University Catering)  No refreshments served

REQUIRED SIGNATURES:	
_____	_____
Individual Making Request	Phone
_____	_____
Faculty or Administrative Sponsor	Phone
_____	_____
Dean, Director, or Vice Chancellor	Phone
_____	
FAIS Account Number	

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REQUEST IS:  Approved by \_\_\_\_\_

Denied - Reason: \_\_\_\_\_

<p><i>(To be completed by Nationality Rooms Program)</i></p> <p>Room Condition inspected and approved by: _____</p> <p>Comments (if not approved):</p>
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