



2023-2024 FACILITIES SET-UP REQUEST

(Submit with On-Campus Activity form or at least 7 school days before event)

For Facilities Only

Earliest Set-up Date / time: _____

Additional set-up or breakdown instructions: _____

Event: _____ Department: _____

Contact: _____ Phone or E-mail: _____

Location: THEATER W BLDG QUAD GYM OTHER: _____

Date: _____ Day of Week: M T W Th F Sa **ACTUAL** Start: _____ am pm
(if multiple, list in Additional Instructions) **Event Time**

Access or set-up time for location: _____ am pm End: _____ am pm

FACILITIES NEEDS

Chairs

Qty: _____

Tables

6-ft Rect....Qty: _____ 8-ft Rect....Qty: _____ Round....Qty: _____
(seats 6 people) (seats 8 people) (seats 8 people)

Other: Whiteboard Podium A-Frames/Qty: _____ Coolers/Qty: _____ Other: _____

SET-UP: Chairs only (Theater Style) **OR** If different, complete the reverse side for detailed set-up

Additional Instructions/Needs

AUDIO VISUAL NEEDS

Microphones

Facility	Wireless Handheld		Wireless Lapel	
	Avail	Need	Avail	Need
W Bldg	2		1	
Theater	2		1	
Quad	2		1	
Gym	1			

# Needed	Stand for Handheld?	
	Yes	No

Available A/V Equipment (Check what you need for your event)

CD Player DVD Player Blu-Ray Auxiliary input Computer Guest Wifi
(W only)

What type of presentation software are you using? (i.e. PowerPoint)

How are you providing your presentation? (i.e. personal laptop, attachment to email, flash drive, etc)

Additional Instructions/Needs

****Tech Support Required?** Yes - Am willing to be trained Yes – Provide personnel No

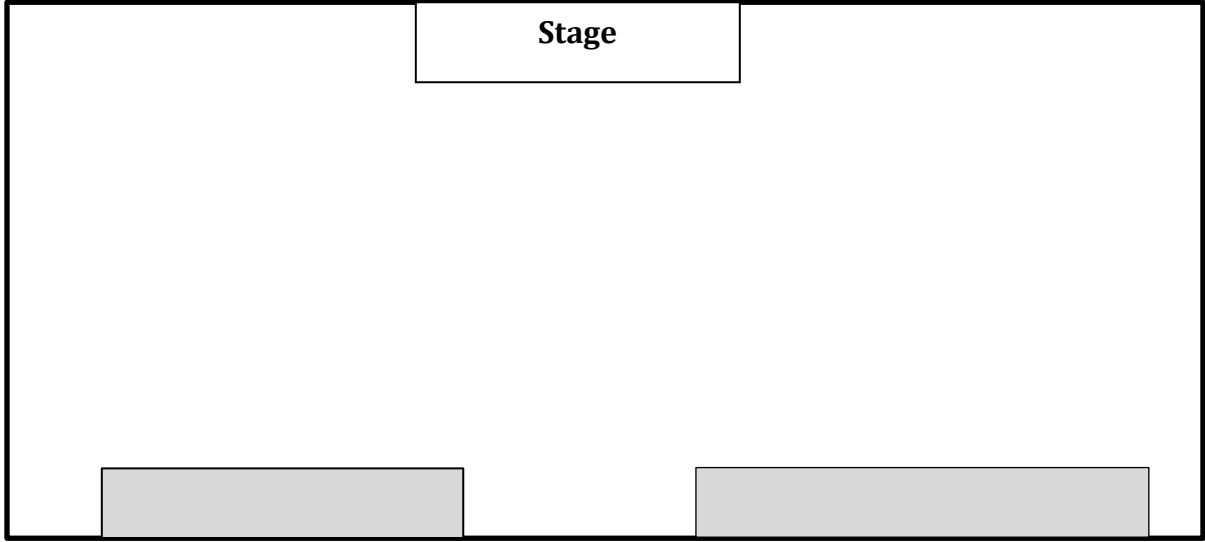
PLEASE PUT THE COMPLETED FORM IN BARB SCHULENBURG'S BOX

Operations Use Only

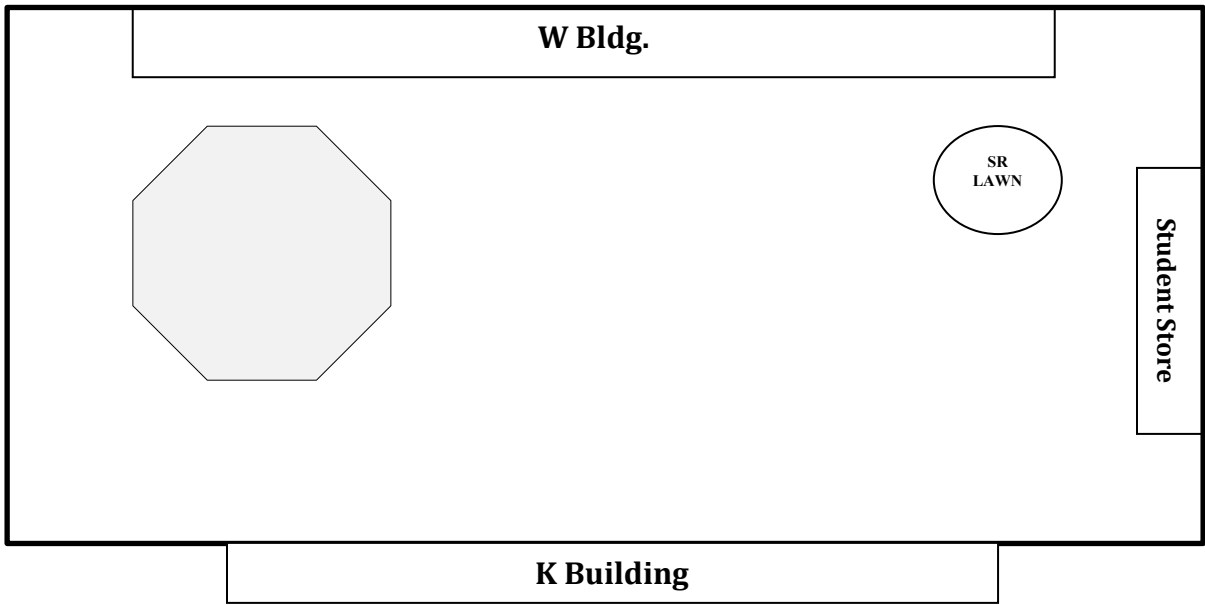
To Help Desk: _____ To Facilities: _____

PLEASE DRAW A MAP DETAILING WHERE YOU WOULD
LIKE TABLES AND CHAIRS TO BE SET UP

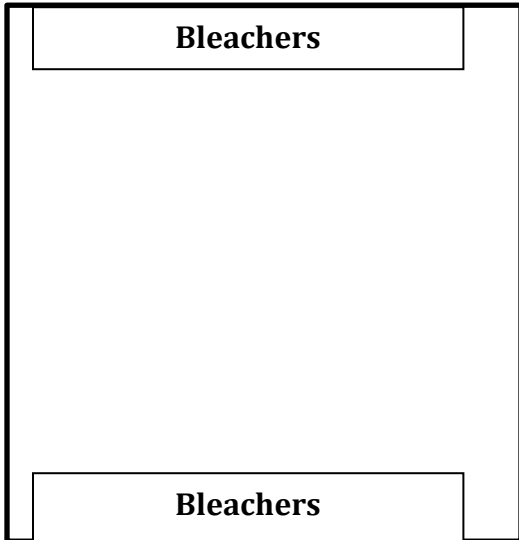
W
BLDG



QUAD



GYM
(LOCKER
SIDE)



THEATER

