



ROOM SCHEDULING REQUEST FORM

Organization Checklist:

- This request is being submitted at least 10 business days before the event date
- I am aware that if any event goes beyond 2:30pm, overtime charges may be assessed to the organization's account
- I am aware that some requests may be subject to approval by the Director of Student Activities
- I am aware that it is the responsibility of the organization to clean up the area at the conclusion of the event

Name of Organization:	Name of Event:	Number of Guests:
Name of Requestor:	Cell Phone Number:	NSU Email:

BUILDING REQUESTED:

ROOM NUMBER(S) REQUESTED

- Business School
- HPD
- Shepard Broad Law Center
- Mailman
- Parker
- Goodwin
- Other

Set Up Time:	Breakdown Time:
Event Start Time:	Event End Time:
Start Date:	End Date:
Number in Attendance:	

Number of Tables Needed: _____

Number of Chairs Needed: _____

Is this a recurring event? Yes No

Will food be served at this event? Yes No