

Requester Information (Please Print)

Name: _____
Telephone No: _____
Department Name: _____
Campus Address: _____

Date: _____
Fax No: _____
E-Mail Address: _____
Room No: _____

EVENT INFORMATION (Please Print)

Event Name: _____
Starting Date: _____ Starting Time: _____

Location: _____
End Date: _____ End Time: _____

TEMPORARY SIGNS (18x24 max. size) Requester is responsible for production of signs and banners.

Choose sign location(s) number: (See Attachment "A" for Locations)
If Directional Arrows are to be included on signs indicate (S) Straight, (R) Right or (L) Left, (N) None, after each numbered location chosen.

1	2	3	4	5	6	7	8
9	10	11	12	13	14	15	16
17	18	19	20	21	22	23	24
25	26	27	28	29			

Date _____
Time _____

Sign Text: _____

Pick-up location: _____

BANNERS

A B C D E F G H I J K L M N
B C D (10' x 4' Max.)

Date _____
Time _____

Banner Text: _____

Date: _____ Time: _____
Yes: _____ No: _____

This request meets the requirements of this office and is forwarded to Space Utilization \$ Q D O \ V L V for consideration.

Vice President/Dean/Director Print Name Date

' H V L J Q D Q G & Space Utilization & Analysis Date

cc: Requester, Physical Plant, file
Complete the entire form. Obtain signature of Director, Dean or Vice President, then forward to Space Utilization & Analysis (Bldg 69, Room W R or H P D L O). A response will be returned to the requester within seven (7) days of receipt of request.

To ensure proper navigation, refer to Attachment A and make sure arrows on the signs are adequately directing traffic for your event.