**UTHSCSA ROOM RESERVATION REQUEST**

**ALL INFORMATION IS REQUIRED**

**(Use TAB key to advance to next field – Do not use ENTER key)**

**Email completed form to** **Zunigaaa@uthscsa.edu** **(save file first then from toolbar select File/Send to)**

|  |  |
| --- | --- |
| Date Request Submitted:       | Person Making Request:             |
| Phone #of person making request:       |       | Email of person making request:      @uthscsa.edu |
| Department Sponsoring Event:            |
| PID for Sponsoring Department:  |        |
| (Room use fees, if applicable, will be charged to this PID)       |
| Name of Budget Authority for this department: |       |
| Name of event:       |
| Will this event require videoconference services?   | Yes [ ]  No[ ]  If so, location         |
| Complete description of event and how this event supports our university mission? (Attach additional sheets if necessary) |
|       |
| Name of outside (off campus) group:      |
| First Date of Event:      |
| Setup Time (If needed; 30 minutes before event recommended): |       |
| Event start time:       |
| Event end time:      |
| Breakdown time (If needed; 30 minutes following event recommended):      |
| Additional Dates and Times:       |
| Date | Setup Time | Event Start Time | Event End Time | Breakdown Time |
|           |        |       |       |       |
|       |       |       |       |       |
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|       |       |       |       |       |
| Estimated Attendance:         |
|  |
| Will outside attendees (non UTHSCSA employees) be invited to this event?  | Yes [ ]   | No[ ]  |
| If yes, who are the outside attendees?        |
| Will a fee be charged to attendees for any reason?  | Yes[ ]   | No[ ]  |
| Are corporate sponsors or vendors invited? | Yes [ ]   | No [ ]   |
| If yes, how many? |            |
| (Fee of $100/vendor)  |
| Room Requested: (1st choice)        |
| (2nd choice)        |
| (3rd choice)       |
|  |
| Must be arranged by reserving party: Room setups, x3-6452, A/V, x7-2210; UTPA-PD- Parking and Security --316-7151;  |
| Video Conference, X7-2214 . |
| **Comments/Questions and/or expanded event description**:  |
|        |

Office Use Only

Completed Date:           Confirmation Sent Date:      Changes Requested:      Reference #:

**Office of Facilities Space Planning & Real Estate- 210-567-2657 Revised – 09/2012**