Facilities Request Form

Conference Services 2121 Euclid Avenue – SC 140 Cleveland, OH 44115

Phone: (216) 523-7203 * Fax: (216) 687-5545

Visit www.csuohio.edu/conferenceservices for CSU Facility Policies and pricing information.

FACILITY APPROVAL:

This completed request form must be submitted to Conference Services a minimum of 10 working days prior to the event in order to receive approval.

CANCELLATION:

Notice must be given in writing within 3 days of the event. Responsible parties will be held financially accountable for all charges that would have been incurred because of commitments made to facilitate the event if proper notice is not provided to Conference Services.

*NAME/DESCRIPTION OF EVENT	·		V	
*DEPARTMENT	*0	RGANIZATION		
*REQUESTOR	*EMAIL	*PF	IONE	
*EVENT CONTACT	*EMAIL	*РЕ	IONE	
*Begin Date M/D/Y Day of Week M/D 1	*End Date *Facility R /Y Day of Week	equested *Set Up Time Begin End		
2				
*Set-Up Requested: ☐ Yes ☐ No ☐ Classroom ☐ Diagram Attached ☐ Hollow Square ☐ Lecture (Chairs only) ☐ Round Tables ☐ U-Shape ☐ Special Instructions	*Equipment Requested:	Qty.	*Event Open To: ☐ Members Only ☐ University Community ☐ General Public *Estimated Attendance Admission \$ *Items for Sale ☐ Yes ☐ No	
*CSU Account Number (Request will NOT be processed if left blank) *Food/beverage present at event? Yes No Special Instructions:			To Be Notified: ☐ Building Services ☐ Grounds Department ☐ Police - Special Attn. ☐ Police - Required	
Conference Ser	Reservation # Entered By	Facility Approval	Signature Authorization: Facility Approval for BU, FH, IM, JH, LB, MC, MU, PE, RC, SI, SR, & UR	
Туре	Date	Conference Services:		