



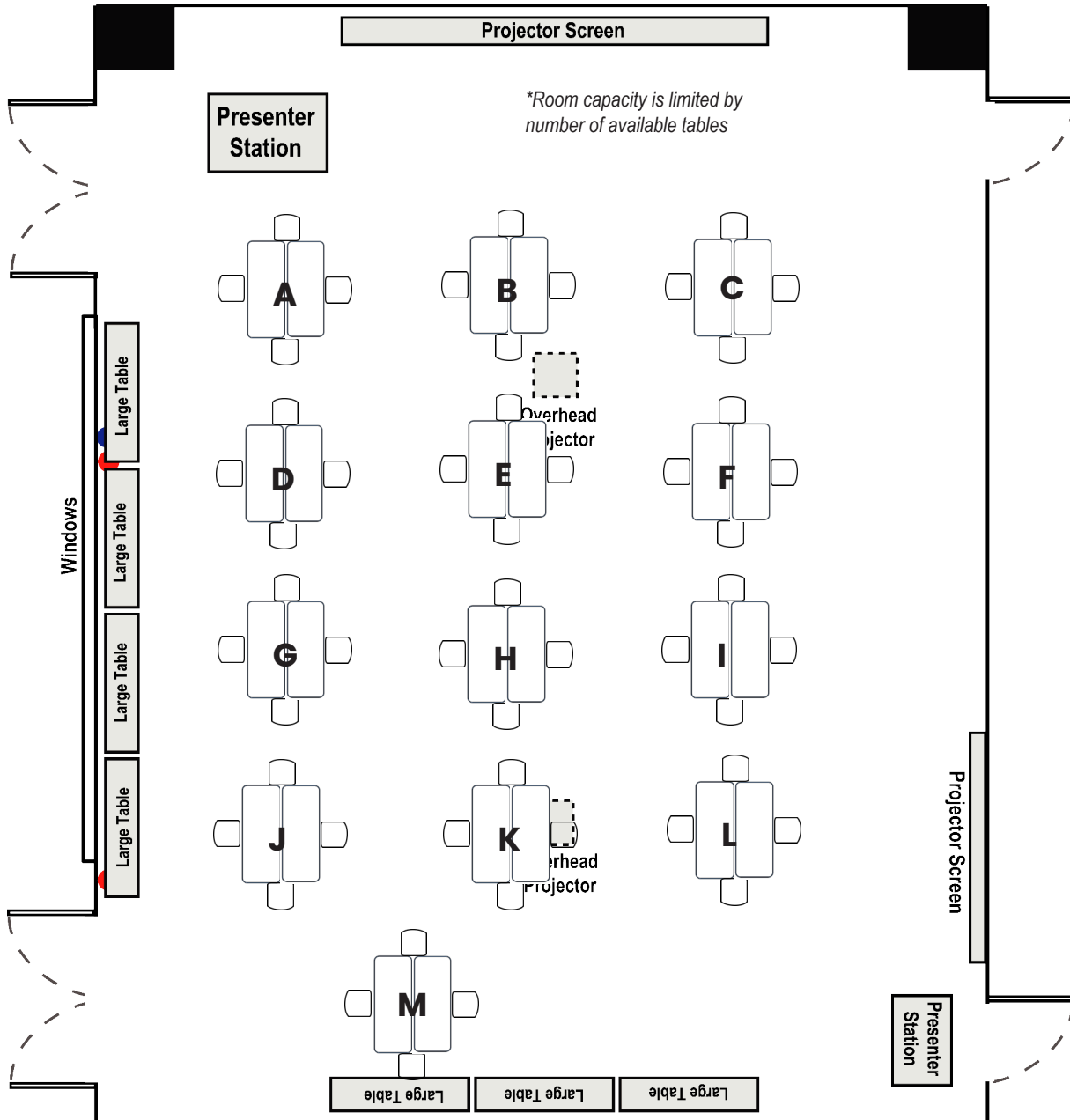
san diego county office of
EDUCATION

FUTURE WITHOUT BOUNDARIES™

Contact Tracing Room Schematic

Room 401/402 – Herringbox for 52

Event name: _____ Date: _____ Time range: _____



Meeting room furniture is set to enable contact tracing. DO NOT CHANGE.

**Room capacity is limited by number of available tables*

Masks are required indoors.

Contact Tracing Room Schematic

Room 401/402 - Herringbox for 52

Event name: _____ Date: _____ Time range: _____

Check the table letter on the front of this form and print participant names by table/group below:

	Table Group	Participant		Table Group	Participant
		EXAMPLE	25	G	
1	A	Bob Mueller	26	G	
2	B	Yolanda Rogers	27	G	
1	A		28	G	
2	A		29	H	
3	A		30	H	
4	A		31	H	
5	B		32	H	
6	B		33	I	
7	B		34	I	
8	B		35	I	
9	C		36	I	
10	C		37	J	
11	C		38	J	
12	C		39	J	
13	D		40	J	
14	D		41	K	
15	D		42	K	
16	D		43	K	
17	E		44	K	
18	E		45	L	
19	E		46	L	
20	E		47	L	
21	F		48	L	
22	F		49	M	
23	F		50	M	
24	F		51	M	
			52	M	
0	Presenter		0	Admin	