

CARUTHERS UNIFIED SCHOOL DISTRICT
IN-HOUSE FACILITIES USE REQUEST

FOR: Scheduling in-house use of facilities (Request shall be made at least one week in advance)

Date Requested _____ Date of Need _____

Organization's Name _____

Person Requesting _____ School Site _____

Activity _____ Size of Group _____

Facility Needed _____

Set Up/Equipment Needed _____

Starting Time _____ Ending Time _____

Admission being charged? Yes ___ No ___ Charge \$ _____

Additional considerations (if before or after school hours, i.e., keys, restrooms, Sonitrol, custodial assistance) _____

Date _____ Requested by _____

Submit this form to the site administrator. Please check the master calendar at the school site if there is a question about possible conflicts.

Approved ___ Disapproved ___ Date _____ Site Administrator _____

Food Service Approval _____ Maintenance Approval _____

Approved ___ Disapproved ___ Date _____ Superintendent _____

OFFICE USE ONLY Entered on Calendar _____
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Copies to: School Office
Cafeteria
Maintenance