Ann M. Garcia-Enriquez Middle School

"Generating Excellence, Motivation, and Success"

Facility Request Form

Today's Date:

Person Requesting Facility

School/Department/Organization: Phone Number:

SESSION INFORMATION

Workshop/Activity:

Date of Event:

Time of Workshop/Activity: From: To:

Number of Participants

FACILITY REQUESTED:

☐ Cafetorium ☐ Indoor Gym ☐ Interior Gym

☐ Parent Center ☐ Library ☐ MPR

PLEASE INDICATE PREFERRED SEATING ARRANGEMENT:

(each line represents a table - Each (X) represents chairs)

☐ Group Discussion

X X X X X X
X X X X X X
X X X X X X

☐ Lecture

X X X X X X

X X X X X X

☐ Pods

X X
X X
X X

☐ Square / Rectangle

X X
X X
X X
X X

☐ No Setup Required

☐ Microphone ☐ Audio Set- up ☐ Laptop & Projector ☐ Projector Screen

☐ Presenter Table ☐ Sign-In Table ☐ Refreshment's Table ☐ Podium

Comments:

For office use ONLY:

☐ Approved ☐ Denied Approved By: Date: