

Auditorium Usage Request Form

(For SZABIST Students' Activities Only)

Event _____

Date _____ Time: From _____ to _____ Expected No. of participants: _____

Name of the Guest (if any): _____

(Eg: Presentations, Meeting of Student Council, Movies, Open Forums etc.)

Audio Visual request:

Multimedia projector

Slide projector

TV / VCR

PC

Other: Specify _____

*Name of Student Responsible _____ Registration#: _____ Program: _____

*The person responsible must ensure that the Multimedia projector is left in the same working condition as received.

Refreshment request:

No. of participants _____

Items _____

Time needed _____

No food will be served or used in the auditorium.

Any other special arrangement: (please specify)

Faculty /Advisor / Program Manager
Signature & Date

IT Dept.
Signature & Date

Administration
Signature & Date

Name of the Person assigned to supervise the event: _____

Designation: _____ Signature & Date _____

Note:

- Please make your request at least 48 hours in advance to the Administrative Office.
- The concerned Program Manager /Faculty Advisor shall be responsible to supervise the respective activity.
- Late Night (after 9:00pm) Usage of the Auditorium will not be permitted unless supervised by the relevant Program Manager /Faculty Advisor.