Sr	bace Request	for Stude	ent Organiza	ations		
Today's Date			RSITY, SACRAM MANAGEMENT	MENTO	mailto:s	pacemgt@csus.edu
			ATION BELOW			
Student Organization		Event Date(s)		Use Space 2 Tab below if needed		
By: User's Name		Day(s) of Event		Use Space 2 Tab below if needed		
Phone		Hours:	Set Up	Start	End	Vacate
Student Organization Email		Number Attending		Spectator/Participant Fee		
SOAL Advisor Email		Amplified Sound-Yes/No		If Yes, list time, place, and manner		
Event During Finals Week-Yes/No		Food/Beverages-Yes/No		If Yes, list what, where, when, and how		
Event Title						
Purpose and Description of Event						
Space Requested (Lecture, conference, ou	utdoor space*) and Fe	atures (smar	t room, tables/cha	iirs, tablet arm	nchairs, whiteb	ooard, etc.)
Special Terms and Conditions. *Please lis	t specific activites for	r use of outdo	oor space. Use S	pace 2 Tab b	elow if neede	ed.
For Space Management Use Only	>					
	COMPLETE RELE	EVANT INFO	RMATION BELC	W		
SERVICES NEEDED:						
Custodial		Recycling				
Electrical		Police				
Grounds	ds Other/Miscellaneous					
# Tables / # Chairs Table/Chair Location						
Note: Tables and chairs shall be requested	d directly from Facilit	ies Managerr	ient - csus.edu/a	ba/facilities		
Please allow at least 10 busines Your request will be conside						
Classroom Use Expectations: Classrooms equipment in good order. Keeping a classrood disposing of everything one came in with suc removed from the room. Users shall take ext room is returned to a class-ready condition. T p.m. each day.	om in good order inclue h as pop/food contain ra care that no damag	des chairs and lers, newspap ge is done to tl	d tables straighten ers, etc. Under no ne classroom, inst	ed, electronic circumstance ructional furn	equipment sh s is furniture o iture, or equip	nut off, taking away or or other property to be ment and that the
For Event Services Use Only						