Office of the Registrar

2180 Third Ave. New York, NY 10035 Room 301 Silberman * (212)396-7566 sbreserve@hunter.cuny.edu

Date: _	
Time:	
Initial:	

FACULTY / STAFF RESERVATION REQUEST INFORMATION FORM

THIS COMPLETED FORM MUST BE SUBMITTED TO THE OFFICE OF THE REGISTRAR, ROOM 301 Silberman.

IT REPRESENTS YOUR REQUEST FOR THE USE OF SILBERMAN CAMPUS SPACE. WE CANNOT CONFIRM THE AVAILBILITY OF YOUR REQUESTED SPACE UNTIL THIS FORM IS SUBMITTED.

	RAM OR OFFICE SPONSORING THIS EVE			
			TITLE/POSITION:	
ROOM#:	PHONE#: (WORK)	(HOME/CELL)	(FAX)	
			ERNATE:	
REQUESTED TIME OF E	VENT: FROM:(PLEASE ALLOW FOR SE	T-UP AND CLEAN-UP TIME)	TO:	
REQUESTED LOCATION			TECHNICIAN REQUESTED?	
		TOPIC OF EVENT:		
	NIZATION:			
NAME OF ALL GOESTS	I LAKERS, AKTISTS, I ERFORMERS, ETC	·		
EXPECTED # OF PEOPLI	E: IS THIS EVENT OPEN	TO THE GENERAL PUBLIC?	WILL TICKETS BE SOLD?	
WILL ANY OTHER ART	ICLES BE SOLD? F	HOW WILL THIS EVENT BE ADV	VERTISED?	
WILL WINE OR BEER BI	E SERVED OR SOLD?	_		
			FROM THE NY STATE LIQUOR AUTHORITY IN ADVANC VENT AND TURNED INTO CENTRAL RESERVATIONS	
WITH YOU TO THE NY	STATE LIQUIOR AUTHORITY. SIGNATU	RES OF THE VP-BUDGET & FIN	LAN IDENTIFYING WHERE THE BAR IS TO BE SET UP IANCE REQUIRED ON NYSLA APLLICATION.	
required. If the event is co- director <u>and</u> Dean of you s The Hunter faculty/staff p	sponsored with a non-Hunter organization <u>or</u> chool. Hunter College facilities cannot be rest e <mark>rson must take full responsibility of coordin</mark>	open to the general public, approva erved by a Hunter College Organiza ating and attending any Hunter sp	al of the department chairperson or the program director is ul must be given by the department chairperson or program ation and then "turned over" to an outside group. onsored or co-sponsored event they are booking. ************************************	
			arges, such as technicians, security, cleaning, etc., must be paid	
			le organization. If admission is charged, the net profit must be forgram or office; it is not be given to or shared with the non-Hunt	
If any non-Hunter College for any lost or stolen proper		the sole responsibility of the faculty.	/staff member to return it. Hunter College will not be responsib	
Signature – Hunter Faculty	/Staff Sponsor		Date	
Signature – Department Ch	airperson		Date	
Dean of School (Please Prin	nt) (Please Sign)		Date	

(Revised 12/02/13)