Graduate Student Center Reservation Form

Name of Person in charge of event: _____

PID of person in charge of event: _____
    *needed to provide access to the space via OneCard swipe access

Department or Organization Name: _____
    The GSC is available for use by graduate, professional and post-doctoral student groups and for academic and professional events.

Purpose/description of Reservation: _____

Address/CB #: _____

Phone Number: _____   **Email:** _____

Date Requested: _____   **Start and End Time:** _____
                                                 * Include time required for set-up
Number of People Expected: _____   and clean-up in your request.

Please note the GSC is accessible to individuals with disabilities.

Do you intend to serve alcoholic beverages? ____ YES ____ NO
(If yes, please see the Guidelines for Serving Alcohol at University-Sponsored Events and obtain approval on the Request for Permission form from the Graduate School Dean and the Provost's Office before returning this reservation form.)

All users understand that it is their responsibility to maintain the Graduate Student Center. The staff of The Graduate School is not responsible for clean-up. By signing below, your group accepts responsibility for the **Use Guidelines for the Graduate Student Center**.

- Users are fully responsible for set-up of tables/chairs needed for reservation time.
- Users are fully responsible for the condition of the Graduate Student Center after use.
- Food must be removed and all trash must be placed in trash containers. No food may be left in the refrigerator after your event.

I have read the conditions of use as stated in the Use Guidelines document. I agree to abide by these conditions and all applicable University regulations. I understand that is it my responsibility to assure that these conditions are observed by members and guests of my department and/or group.

REQUIRED: _____
                           Signature of Faculty/Staff/Student making reservation

REQUIRED: _____
                   Signature of Director/Chair/Officer of organization making reservation

Office Use Only:
APPROVED: _____ **DATE**: _____
Entered into GSC Calendar: _____   **Event number:** _____