# **Summary of Facility Reservation Request Form**

### **Personal Details**

Full Name	
Contact Number	Requestor Information
0	
Requestor Type	
Event Information	
Event Name	
Event Date/Day	
11/13/2023	
Event Description	
Expected Participants	Purpose/Objective
4	
Required Days	Start Time
3	03:42 PM
End Time	
12:00 AM	

## **Facilities Needed**

Here is the list of facilities you have selected:

- **✓** Auditorium
- **✓** Main Lobby

## **Equipment Needed**

Here is the list of equipment you have selected:

#### MIS/IT

- **√** Sound System 1
- ✓ Microphone 2
- **✓ LCD Projector** 3
- √ Widescreen 4

	Bag
Venue Approval	
Osa Approval	