Event Reservation Request

All programs, meetings, and events must be "long term" events with included-speakers, events intended to appeal to the general public including weekly seminars, lecture series, workshops, recitals, or similar events and programs. For one-time events, such as banquets, parties, receptions, work meetings, athletic practices, rehearsals, etc., please use the Form for Single Event Requests. For all events, the approval process will take at least 7-10 business days. A meeting request form that is not submitted at least 14 days prior to the event date will not be approved.

Event Title

*Please give us a CELL PHONE number for the Event Host attending the event, in case of emergency.

CELL PHONE #

Will use the room as normally arranged.

Will use technology in the room, but do not need Media Services support.

Will arrange food from an off campus source

PROPOSED EVENT CONTENT

*Please note: Our web order form has changed to accommodate the new Oracle Finance and Accounting system. Information not included may result in a delay.

Thesis Committee Meeting/Defense

If you have any questions, please contact the Event Coordinator, Lisa Noyes, at (802) 443-5522 or Lisa.Noyes@middlebury.edu. Lisa will be happy to answer any questions you have!

Program Type

If a program of events, please provide the Program Name (for example: Clifford Symposium)

Program Name

Additional Sponsors

Provide us with the complete name of any additional sponsoring organizations/departments.

ADDITIONAL SPONSORS

EXTRA TIME REQUIRED ON ROOM RESERVATION

Include any additional time anticipated to allow for service providers to complete any tasks they may have.

Is the presenter/performer an international guest traveling to Middlebury from abroad?

GUEST TYPE

Is this a video conference?

SPECIAL CONSIDERATIONS

Does this event present any unusual support requirements or security concerns?

ADVISOR CONSULTED

Include an explanation.

STAFF

Please list the time you anticipate the event to conclude.

PREFERRED END TIME

Identify the actual start of the event.

PREFERRED START TIME

EXPECTED ATTENDANCE

Leave this blank if you prefer an appropriate location to be identified for your event.

ADVISOR CONSULTED

See the previous item.

ADDITIONAL SPONSORS

Provide an explanation.

SECURITY/REQUIREMENTS EXPLANATION

EVENT TITLE

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Thesis Committee Meeting/Defense

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Do not include time for clean up in this time block.

Please keep the event date.

Event Reservation Request

Please keep the event date.

Hour

Due Date

[Submit]

EXPIRING, \ CASE, 2012

*Required fields.