

GRAMBLING STATE UNIVERSITY

**SUBJECT: FACILITIES AND PREMISES USE POLICY
AND AGREEMENTS***

EFFECTIVE DATE

October 17, 2002

Revised March 13, 2007

FAS003

CONTACT: Director of Business Services

**University Facilities and Premises
Use Application**

(please print)



For Office Use ONLY

- Return for Approval
- Date Unavailable
- Facility Unavailable
- Need Signatures
- Add'l Infor. Required
- Approved
- Not Approved
- Deposit
- Leasing Fee
- Security Fee
- Operations
- Administrative
- Other _____

Title of Event _____

Date(s) of Event _____ Time _____ AM/PM

Name of Lessee/Organization/Department _____

Primary Contact _____ Telephone Number _____ Cell _____

Secondary Contact _____ Telephone Number _____ Cell _____

FACILITY INFORMATION:

Facility Requested _____ **Room Selection** _____ **Alternate Site** _____ **Signage Req. Attached** _____

Additional Facility/ Parking Area Requested _____ **Estimated Attendance** _____

Event Start Time _____ **A/PM** _____ **Event Ending Time** _____ **A/PM** _____ **Total Use Time** _____ **Hrs.**

Final Time for Vacating Premises _____ **A/PM** _____ **Person Responsible for Closure** _____

Type of Event _____ **Open to Public** _____ **Closed (Members Only)** _____

Security _____ **University Police Officer #** _____ **City/State #** _____ **Private #** _____

(Check All That Apply)

Student Sponsored _____ **Employee Sponsored** _____ **Alumni** _____ **Alumni Chapter** _____ **Other** _____

Fundraiser _____ **Conference/Workshop** _____ **Dance/Social** _____ **Meeting** _____ **Annual Event** _____

Admission Charge \$ _____ **Non-Profit /501-C(3)** _____ **Profit** _____ **Univ. App. Fundraiser** _____

Event Set-UP (Set-up fees may apply)

Self Set-up _____ **Facilities Set-up Required** _____ **Student Union Set-up Required** _____ **No. of Tables Required** _____

Head Table Set-up _____ **Banquet Tables Set-up** _____ **Round** _____ **Rectangle** _____ **Reception Seating No.** _____

Conference Set-up _____ **General Meeting/Informational** _____ **Other** _____ **Preferred Set-up Attached** **Yes** _____ **No** _____

Equipment Requested (Fees may apply)

US/LA Flags _____ **Round Tables** _____ **Rectangle Tables** _____ **Sound System** _____ **Lectern/Audio** _____ **TV/VCR** _____

Projector _____ **Easel/Flip Chart** _____ **Electrical Needs** _____ **Plants** _____

Special Equipment Needs _____ (Not Guaranteed)

Comments:

All APPLICATIONS MUST BE SUBMITTED AT LEAST 2 WEEKS PRIOR TO THE PROPOSED EVENT DATE.
Grambling State University is an equal access university. Any special accommodations in compliance with the Americans with Disabilities Act of 1990 may be requested by calling the EO Director at (318) 274- 3116 within 10 days of the event.

Primary Event Sponsor/Advisor Date

Director, GSU Police Dept. Date

Primary Event Sponsor/Advisor Date

Sr. Assoc. VP for Operations Date