# Auditorium Usage Request Form

**For SZABIST Students’ Activities Only**

**Event** __________________________________________________________

**Date** ____________  **Time:** From ______ to ______  **Expected No. of participants:** __________________

**Name of the Guest (if any):** ___________________________________________

_Eg: Presentations, Meeting of Student Council, Movies, Open Forums etc._

## Audio Visual request:

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<tbody>
<tr>
<td></td>
<td>☐</td>
<td>Multimedia projector</td>
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<td>☐</td>
<td>Slide projector</td>
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<td>☐</td>
<td>TV / VCR</td>
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<td>PC</td>
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<td>Other: Specify ________________________________________________</td>
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*Name of Student Responsible____________________  Registration#: ___________  Program:__________

*The person responsible must ensure that the Multimedia projector is left in the same working condition as received.*

## Refreshment request:

**No. of participants** __________________________________________

**Items** _______________________________________________________________

**Time needed** _________________________________________________________

_No food will be served or used in the auditorium._

Any other special arrangement: (please specify)

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Faculty Advisor / Program Manager  Examination Controller  IT Dept.  Senior Administrative Manager
Signature & Date  Signature & Date  Signature & Date  Signature & Date

**Name of the Person assigned to supervise the event:** __________________________________

**Designation:** _____________________  Signature & Date_________________________

**Note:**

- Please make your request at least 48 hours in advance to the Administrative Office.
- The concerned Program Manager /Faculty Advisor shall be responsible to supervise the respective activity.
- Late Night (after 9:00pm) Usage of the Auditorium will not be permitted unless supervised by the relevant Program Manager /Faculty Advisor.

Revised April 21, 2014