HSC Facility Request for SoM Teaching Lab

This form is to be completed by individuals seeking to reserve teaching space in the HSC for lab classes.
To verify booking - check: CONFIRMED RESERVATIONS at the Media Services website
http://www.uhmc.sunysb.edu/mediasvs/

Requester Information

PLEASE PRINT

Instructor's Name _____ Address _____ Phone _____ Zip _____

This individual is responsible for the group's full adherence to Security and Environmental Health policies and procedures governing these spaces. You are required to return the space to its original condition upon closure of your event. This request is for SPACE and LAB STAFFING ONLY.
AV SUPPORT MUST BE REQUESTED SEPERATELY. Downloadable forms for AV are available at http://www.uhmc.sunysb.edu/mediasvs/Pages/request.html

Sponsor Information

Sponsor's Signature _____ _____

Lana Ovtcharenko 4-9715 countersign: Burke Kincaid 4-2341

Course Information

Sessions must end promptly to enable the next session to begin on the hour or half hour.

_____ **Anticipated Attendance**

This activity is part of a degree-granting program? ❑ No ❑ Yes If "Yes" ⇨

Course Code			Course #		

Course Title _____

161 lab

Date	Set-up (lab staff only ▽)	Class Start	Class End	Strike (lab staff only ▽)

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Comments, notes, remarks

for additional information, contact: Classroom Coordinator • Media Services
HSC L-3 Room 044 • zip 8030 • phone: 4-3228 • fax: 444-3500