

EVENT & CLASSROOM RESERVATION REQUEST

OFFICE OF THE REGISTRAR
EVENTSCHEDULING@MONTANA.EDU

PLEASE READ THE "CLASSROOM RESERVATION POLICY" BELOW BEFORE COMPLETING THIS FORM.
FOR ACADEMIC COURSE CLASSROOMS, PLEASE USE THE "CHANGES TO SCHEDULE AFTER FINAL UPDATE" FORM.

<input type="radio"/> THIS IS AN INITIAL ROOM RESERVATION REQUEST.	<input type="radio"/> THIS IS TO CONFIRM AN EXISTING RESERVATION.	CONFIRMATION NUMBER*: _____ <small>*REQUIRED IF CONFIRMING A PREVIOUSLY SCHEDULED ROOM.</small>
DEPARTMENT OR ORGANIZATION*: _____ <small>*STUDENT ORGANIZATIONS MUST ATTACH A COPY OF THEIR RECOGNITION LETTER.</small>	NAME OF REQUESTOR: _____	
SEND CLASSROOM RESERVATION CONFIRMATION TO:		
NAME: _____	PHONE: _____	EMAIL: _____
EVENT: _____	WILL A REGISTRATION OR ADMISSION FEE BE CHARGED? No <input type="radio"/> Yes <input type="radio"/>	

BUILDING & ROOM	START TIME	AM OR PM	END TIME	AM OR PM	START DATE	END DATE (IF MORE THAN A ONE-DAY EVENT)	DAY OF THE WEEK (IF A ONE-DAY EVENT)	HOW MANY COMING
.....	<input type="radio"/> AM <input type="radio"/> PM	<input type="radio"/> AM <input type="radio"/> PM	.....	.....	.....	.....
.....	<input type="radio"/> AM <input type="radio"/> PM	<input type="radio"/> AM <input type="radio"/> PM	.....	.....	.....	.....
.....	<input type="radio"/> AM <input type="radio"/> PM	<input type="radio"/> AM <input type="radio"/> PM	.....	.....	.....	.....
.....	<input type="radio"/> AM <input type="radio"/> PM	<input type="radio"/> AM <input type="radio"/> PM	.....	.....	.....	.....

SIGNATURE OF FACULTY/STAFF ADVISOR

SIGNATURE OF PERSON IN CHARGE OF EVENT

~ CLASSROOM RESERVATION POLICY ~

◆ BOTH CAMPUS AND NON-CAMPUS ORGANIZATIONS ARE TO USE THIS FORM TO RESERVE CLASSROOMS. ◆ TELEPHONE CALLS CONCERNING ROOM RESERVATIONS WILL NOT BE CONSIDERED OFFICIAL UNLESS CONFIRMED BY THIS FORM. ◆ THE REGISTRAR'S OFFICE MUST RECEIVE THIS COMPLETED FORM AT LEAST 3 BUSINESS DAYS PRIOR TO THE EVENT. ◆ SCHEDULED ACADEMIC CLASSES, COMMON HOUR EXAMS, AND FINAL EXAMS HAVE PRIORITY FOR ALL GENERAL CLASSROOMS. ◆ CLASSROOM RESERVATIONS ARE ONLY MADE AFTER ALL CLASSES HAVE BEEN SCHEDULED. ◆ ACADEMIC CLASSROOMS MAY NOT BE USED AS STUDY ROOMS DURING HOLIDAYS OR WEEKENDS. ◆ FOOD, BEVERAGES, AND SMOKING ARE PROHIBITED IN ALL CLASSROOMS. ◆ AFTER CLASSROOM USE, ALL FURNITURE MUST BE PLACED IN AN ORDERLY, TIDY FASHION. ◆ THE HOSTING ORGANIZATION IS RESPONSIBLE FOR CLEANING THE CLASSROOM AFTER ITS USE. ANY EXTRA CLEANING REQUIRED WILL BE CHARGED TO THE FACULTY ADVISOR OR THE ORGANIZATION. FAILURE TO PAY FOR EXTRA CLEANING WILL RESULT IN LOSS OF ROOM USE FOR ONE YEAR. ◆ THE FACULTY/STAFF ADVISOR OR ORGANIZATION WILL BE HELD RESPONSIBLE FOR THE ROOM AND ANY DAMAGES INCURRED. ◆ THE ROOM WILL BE CLEANED AND VACATED BY THE TIME SPECIFIED ON THIS REQUEST. ◆ VERIFIED SERIOUS INFRACTIONS OF THIS POLICY OR LACK OF COOPERATION WILL RESULT IN THE FORFEITURE OF ROOM USE.

~ OFFICE USE ONLY ~

A&E OFFICE RECOGNIZED STUDENT ORGANIZATION: _____	
REGISTRAR APPROVED: _____	DATE: _____
FACILITIES SERVICES: _____	UNIVERSITY POLICE: _____
BANNER: _____	HVAC: _____
ASTRA: _____	

PLEASE EMAIL SIGNED REQUESTS, WITH ACTIVITIES & ENGAGEMENT OFFICE STUDENT ORGANIZATION RECOGNITION LETTER, IF APPLICABLE, TO:

EVENTSCHEDULING@MONTANA.EDU

REQUESTS MAY ALSO BE FAXED TO 994-2011, OR MAILED TO THE OFFICE OF THE REGISTRAR, 101 MONTANA HALL