Student Life Office
Facilities Request Form

The Facilities Request Form must be completed, signed by the club advisor, and submitted to the Student Life Office no later than ten (10) business days prior to the activity, event, or meeting on-campus. College holidays and weekends are not included. If an activity, event, or meeting must be cancelled or needs to be rescheduled, student clubs must notify their club advisor as well as the Student Life Office immediately and no later than three (3) business days prior.

All requests are subject to availability and upon the review and approval of the Administrative Services Office.

Club advisors may review if a college facility is available by clicking on the following website: https://25live.collegenet.com/clpccd/.
Access to 25Live is required to utilize this feature. **Username: studentlifeuser Password: authorized**
Information on how to search for locations and resources is available by clicking on the following website: http://www.laspositascollege.edu/facilities/assets/docs/howtosearcheventslocation.pdf

ACTIVITY, EVENT OR MEETING INFORMATION

Club Name:_____

Activity/Event/Meeting Title:_____

Date(s):_____

Event Type: ☐Meeting   ☐Fundraiser*   ☐Social   ☐Other:_____

*Please contact the Student Life Office to set-up a meeting to discuss policies and procedures to obtain approval to host a fundraiser. Additional forms are required.

Start Time:_____ End Time:_____

Is additional set-up or tear down time required: ☐Yes   ☐No

Set-up start time:_____ Tear down end time:_____

Estimated number of attendees expected:_____

Facility Preference (1st choice):_____ Facility Preference (2nd choice):_____

RESOURCES

Indicate the number of each item needed:

Tables:_____   Chairs:_____   Canopies:_____   Trash Cans:_____   Recycle Bins:_____

Sound System:_____   Microphone:_____   Other:_____

REQUESTER INFORMATION

Requester Name:_____   Telephone #:_____

Requester Signature:_____   Email:_____

Advisor Name:_____   Advisor Email:_____

Advisor Signature:_____   Submission Date:_____

A CONFIRMATION EMAIL WILL BE SENT TO THE ADVISOR WHEN THE REQUEST HAS BEEN APPROVED

FOR OFFICE USE ONLY

Date Received by Student Life Office:_____   Staff Initials:_____

Date Entered into 25Live:_____   Staff Initials:_____