

# College of San Mateo Faculty/Staff Request Form



For any events/meetings that require room setup or media support, please submit your request at least **three weeks** in advance.

Please contact CSM Facilities Rental at [csmfacilitiesrental@smccd.edu](mailto:csmfacilitiesrental@smccd.edu) if you have questions about this form.

## Applicant Information

\* Is this an ASCSM/Club event?

- Yes
- No

\* Name of Club/Division

\* Contact Name:

Contact Phone:

\* Contact Email:

## Facility Use/Event Information

\* Event Name:

\* Add a Meeting:

Add Meeting

No meetings created. [Add Meeting](#)

Facility/Room Type

If you are unable to find a room in the Assign Rooms option above, please describe the type of room required for this event (Bayview, Classrooms, Conference Rooms, Coutyard, Gym, etc.) :

\* Please describe your furniture, A/V or other equipment needs:

Special arrangements, if any:

### Other Information

\* Will you be collecting admissions or sales?

- Yes
- No

If yes, for what purpose are the funds from admissions or sales used?

\* Will you be providing concessions?

- Yes
- No

If yes, please describe the concessions you will be providing:

\* Will you be serving food?

- Yes
- No

If yes, please describe your catering/food service information:

\* Will you be serving alcohol?

- Yes
- No

\* Will you have live music?

- Yes
- No

If yes, please provide the name of the musician(s) who will be performing:

\* Will you have a guest speaker?

- Yes
- No

If yes, please provide the name(s) of your guest speaker(s):

\* Does your event require the participation of the President or Vice Presidents?

- Yes
- No

If yes, whom would you like to attend?

\* Will minors (under 18 years of age) be in attendance?

- Yes
- No

\* Will your event include community members (non-SMCCD employees or students)?

- Yes
- No

If this event requires additional resources (Facilities, Custodial, IT, Public Safety, etc.), please provide FOAP:

Please provide any additional comments or questions regarding your event:

### SMCCD Terms and Conditions

The applicant understands and agrees this application is not a confirmation of facility use and that the date(s) for the event will not be confirmed until the application has been reviewed and approved by College. Upon approval by College, the applicant will be required to sign the District's Facilities Use Agreement to finalize the application. This application is not valid unless a Facilities Use Agreement, signed by both the Permittee and the District, is attached. Total estimated fees are based on information provided by the applicant. Applicant is responsible for actual fees incurred. Any additional fees will be invoiced and will be due upon receipt.

**By initialling this section, you agree to SMCCD Terms and Conditions.**

\*

### -----The Facilities Rental Office will complete the section below.-----

**Personnel Requirement (All staff charges will be at a two hour minimum):**

Type:	# of Staff:	Est. Fees:
Security		
Custodial		
Technician		
Special Tech.		
Grounds		
Other		