



### Internal Computer Lab and Classroom Reservation Request

Submit requests no less than seven days prior to the event

Today's Date:	
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If your event requires special set up or an alternate room configuration, please fill out a [Facility Request Application](#).

**Contact Info:**

Requested by:	
Contact/Person Responsible for Event (Name & Title)	
Phone:	
Email:	

**About your event:**

Event title:			
Description of event:			
Event Date:		Event end date:	
Event start time:		Event end time:	
Expected attendance:			

Please provide desired date(s) and time(s) if your event recurs.

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**Classroom and lab requirements:**

(No food or drinks are allowed in the labs)

Classroom preference:		Desired accommodations:	
Software requirements:			

**Prep time:**

Would you like to schedule 30 minutes prior to your event to prepare, test the equipment and software?

Yes                      No

**Confirmation:** Your event is NOT scheduled until you receive an email confirmation. You will be required to print the confirmation email to obtain keys from the mail room.

Questions: Contact [sherri.braaksma@gccd.edu](mailto:sherri.braaksma@gccd.edu)