

UUCB Request for Custodial Support
("Green Sheet")

DEADLINE FOR SUBMISSION: 1 week prior to your event, into Facilities Supervisor's mailbox #22
AFTER THIS DATE, YOUR REQUEST FOR SET UP CANNOT BE GUARANTEED

Name of event _____

Event Sponsor (program group/committee) _____

SINGLE EVENT: Day and Date of event (i.e. Friday, Nov. 14th) _____

REPEATED EVENT: Day of the week _____ Start date _____ End date _____

Start time _____ End time _____

Before event, rooms should be set up by (specify time) _____

After event, clean up should start at (specify time) _____

Event Coordinator name _____

Event Coordinator phone(s) _____

Cleanup Coordinator name _____

Cleanup Coordinator phone(s) _____

Facilities staff dishwasher needed? Yes ___ No ___

Room(s) Reserved w/ Resources Coordinator _____

Number of persons expected to attend _____

Coffee set up? Yes ___ No ___ Estimated cups: regular _____ decaf _____ hot water/tea _____

Description of set up and equipment needed:

Diagram of furniture etc. placement: please use reverse →

Signature of Event Coordinator

Date Submitted

Revised 10/4/06