To be returned by email to:

smart-facility@uow.edu.au

**Part A: To be completed by applicant:**

Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Faculty: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for Room Booking: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Anticipated Number of People Attending: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Planned Time/Date of Meeting/Function \_\_\_\_\_\_\_\_\_am/pm until \_\_\_\_\_\_\_ am/ pm Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred Room: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*Please note: all rooms will be allocated based on SMART Infrastructure Facility’s requirements.**

***Kitchen facilities are not provided and all catering is to be provided within meeting rooms.***

Catering organised YES/NO Please advise provider details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will you require: Data projector Whiteboard Video conferencing other: Please give details \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Setup of room:**

Should you require a different setup than the room is currently in, please contact FMD to arrange setup and pack down immediately after the event. ***Set up and pack down is the applicants responsibility.***

 I will use the room as is I have arranged setup and pack down with FMD. FMD reference No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Part B: Internal Promotion and Way Finding:**

SMART Infrastructure Facility has a number of touch screens that can assist attendees in finding the room allocated for your event.

Would you like your event listed. **Yes/No**

Please state how you would like your event Titled:

**Part C: By signing below I confirm I understand that:**

* SMART Infrastructure Facility will wherever possible support the use of its meeting rooms by University staff.
* SMART Infrastructure Facility reserves the right to change room allocation depending on the requirements of the Facility on a given day.
* The provided rooms are for content only, all admin support, catering and IT requirements must be undertaken by the applicant.
* All rooms must be returned clean and tidy and to the same set up as prior to booking.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SMART OFFICE USE ONLY:**

**Request Received by:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Room Allocated: 102 105 209 312 Advisory Council Room Foyer **(Please check**

 **With CEO Assist &**

 **Marketing Manager)**

Contact Advised: Room Catering IT Requirements

Date Advised:­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Large events to be Authorised by COO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Post Event Check:**

Room returned to standard setup

Left Clean and Tidy