

OFFICE OF CHRISTINE FRAZIER
KERN COUNTY SUPERINTENDENT OF SCHOOLS

CONFERENCE ROOM REQUEST

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Theater Arrangement - All chairs; Workshop Arrangement - tables and chairs in a herringbone shape

CITY CENTRE – 1300 17th St.

- CONFERENCE 1-A (Board Room)
Theater Only – 125
- CONFERENCE 1-B
Workshop Only – 70

ACCESS CENTER – 1330 Truxtun Ave.

- CONFERENCE Rm. 116
Workshop – 40
- CONFERENCE Rm. 117
Workshop - 40
- CONFERENCE Rm. 122
U-Shape – 22
- CONFERENCE Rm. 123
Workshop - 25
- CONFERENCE Rms. 116 and 117 together
Workshop - 80

UNIVERSITY SQUARE – 2000 “K” St.

- CONFERENCE Rm. US-1
Workshop – 100
Theater – 100
Square - 60
- CONFERENCE Rm. US-2
Workshop – 100
Theater – 100
Square – 60
- CONFERENCE Rm. US-3
Square only – 20

LEARNING CENTER – 2020 “K” St.

- CLASSROOM 1
Square – 25
- CLASSROOM 2
Square – 25
- CLASSROOMS 1 and 2 together
U Shape - 60

- Variations of standard arrangements must be requested at least 24 hours in advance or the standard configuration will be used.
- Variations may not be possible during heavy room use.

DATE OF REQUEST _____

DATE OF MEETING

NAME OF MEETING FOR CALENDAR _____

TIME OF MEETING: FROM _____ TO _____ ROOM(S) REQUESTED _____

ANTICIPATED NUMBER ATTENDING _____ TARGET AUDIENCE _____

•THEATER STYLE

•WORKSHOP STYLE

•SQUARE

•CHALKBOARD

•PODIUM

•MICROPHONE

•OVERHEAD PROJECTOR

•SCREEN

•VCR

•MONITOR

•EASEL

•CHART RACK

•SLIDE PROJECTOR

CUSTODIAL SERVICE AFTER •LUNCH •DINNER •OTHER _____

COFFEE SUPPLIES: •REGULAR •DECAF •TEA

REQUESTED BY: _____ PREPARED BY: _____ Ext. _____

- Dates of multiple meetings may be listed in the blank space below. If you wish a special arrangement, please draw a diagram and attach to this form.

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PLEASE SEND ALL COPIES OF THIS COMPLETED FORM TO FACILITIES AND PROPERTY MANAGEMENT. A COPY OF THE REQUEST WILL BE RETURNED AS CONFIRMATION OF THE RESERVATION. **PLEASE CANCEL ANY RESERVATIONS NOT NEEDED. THERE WILL BE A CHARGE FOR SETUP IF A RESERVATION HAS NOT BEEN CANCELED.**

DATE RECEIVED _____

BY _____

DATE RESERVED _____