

**LUZERNE INTERMEDIATE UNIT
ROOM RESERVATION FORM**

*All fields with an * must be completed.*

* **Name:** _____ * **Today's Date:** _____

* **Name of Group Meeting:** _____

* **Purpose of Meeting:** _____

* **Date of Meeting:** _____

* **Meeting Start Time:** _____ * **Meeting End Time:** _____

* **Approximate Number of People Attending:** _____

* **Room Preferred:**

Room 112

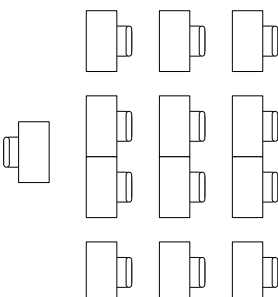
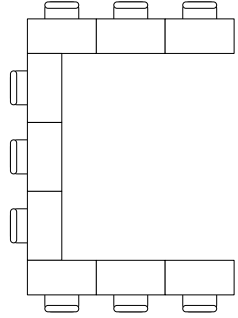
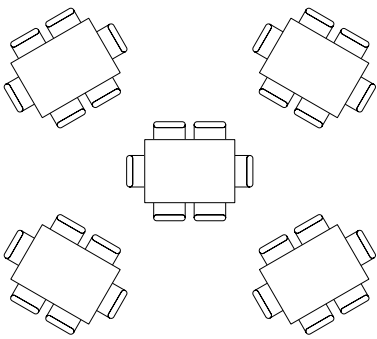
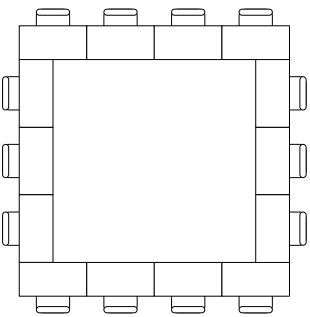
Third Floor Auditorium

Room 218

Computer Lab

Room 311

Room Configuration:

Classroom	Board
	
Group	Conference
	

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Equipment Required:

Overhead Projector	TV / VCR	Flip Chart
Laptop Computer	LCD Projector	Internet Connection
Promethean Board (Computer Lab Only!)	Smartboard (Room 311 Only!)	

Coffee Required: Yes No

Need for Special Arrangements:

Approval: _____
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Date