

APPLICATION FOR NON-COMMERCIAL USE OF UNIVERSITY FACILITIES

Address:						
Name of Organizer:						
Email:	Phone:					
Name/title of Authorize	ed Representa	tive for Permi	t:			
Event type: ESC	Sponsored	Non-ESC	Sponsored	Estimated Att	endance:	
ocation requested:	Saratoga b	uilding(s):	Rochester Room(s):			
Purpose of Event:						
Details of Request:	#1	#2	#3	#4	#5	Additional
Date						
Door Unlock						
Set-up Time						
Event Start Time						
Event End Time						
Clean-up Time						
Door Lock						
	*Afterhours, i	including wee	kends, available	pending staff	availablility fo	r an additional fee.
We are requesting:	Total # of Days		_Total # Hours			
Setup needed:	Open U	Square	Workshop	Classroom	Boardroom	Other:
echnology needed:	Phone AV Equipment* Click here for examples of table setups					or examples of table setups
		nust provide			•	ne and speakers. Please note al to the meeting organizer
Food being served:	Yes	No	If yes, by who	?		
High Profile Attendee:	Yes	No	If yes, who? _			
acilities for non-ESC sp	oonsored even d permit by pe	ts: ermittee and	notary public			UNY Empire State College's College as additionally insured

- Certificate of workers' compensation insurance and disability, if applicable, a waiver of workers'
 compensation: a form can be filed out and printed from this site to be exempt from diability coverage
 http://www.wcb.ny.gov/content/ebiz/wc_db_exemptions/requestExemptionOverview.jsp
- Certificate of incorporation
- All depostis and payment

Please return to: SUNY Empire State College

ATTN: Facilities

2 Union Ave.

Saratoga Springs, NY 12866

For Questions: facilitiesuse@esc.edu

(518) 581-2246 phone