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**W20-500**

**Phone: 617-253-3913**

**Email: cacscheduling@mit.edu**

**Web: studentlife.mit.edu/cac**

**Department Space Application**

*This form is to be completed by a faculty/staff member of an MIT department, program, or non-student group in order to reserve facilities in the Campus Activities Complex. Forms must be submitted at least one week in advance to the CAC office, W20-500.* ***Please note that this form is an application.******Submitting a completed form does not ensure that the space has been reserved for you. Please do not consider your application approved until receiving written confirmation from the CAC office.***

Department/Group: \*Cost Center:

Requestor: G/L Account:

MIT Address: Phone:

Status at MIT: Email:

*\*Required of all reservations regardless of whether fees will apply. The space requestor must also be authorized to commit funds on the designated cost center.*

|  |  |
| --- | --- |
| Event Title: |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Event Type: |  | Meeting |  | Lecture | |  | Party | | | |  | Conference | | | |
|  |  | | | | | | | |  |  | |  | |  | |
|  |  | Rehearsal |  | Performance | Other: | | |  | | | | |  | |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date(s) | Location(s) | Event Start  AM/PM | Event End  AM/PM | Setup  Ready By |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |
| --- | --- |
| How many people do you anticipate attending the event? |  |

*Consult diagrams in the CAC Office or the “Event Planning Guide” at* ***mit.edu/eventguide/*** *before selecting a setup style. Equipment will be based on estimated attendance. Please realize that some rooms have fixed setups.*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Setup Style: |  | Conference |  | Lecture |  |  | U-Shape | |  | | Hollow Square | | |  |  | Banquet |
|  |  | | | | | | | | |  | |  | |  | | |
|  |  | Classroom |  | To be arranged with a CAC Manager | | | | | | | | |  | | | |
|  |  | | | | | | | | |  | |  | |  | | |
|  |  | No Set-Up |  | Additional Equipment | | | |  | | | | | | | | |

|  |  |  |
| --- | --- | --- |
|  | **YES** | **NO** |
| Will an admission/registration fee be charged? |  |  |
| Are you sponsoring a non-MIT group? |  |  |
| Name of the non-MIT group? |  |  |
| Will this event be open to the general public? |  |  |
| How will this event be promoted? |  |  |
| Will alcohol be served? |  |  |
| Will there be minors? (non-MIT under 18) |  |  |
| Will there be music? |  |  |
| Will there be a DJ/Live Band? |  |  |
| Is there a contract involved? |  |  |
| Do you intend to sell anything? |  |  |
| Will you have Audio Visual needs? |  |  |
| Audio Visual Provider? |  |  |
| \*Do you plan to have food at the event? |  |  |
| Who will be your caterer? |  |  |

*If you do not use an MIT caterer, you may need to provide the CAC with a copy of your caterer’s liability insurance prior to the event. This only applies if food is being served by wait staff.*

**Will the intended audience of your event be: (check one)**

**Immediate MIT Community Only non-MIT and MIT Community**

*On behalf of the above MIT Department/group, I agree to adhere to all conditions outlined above, all Institute policies and procedures, and laws of the Commonwealth of Massachusetts.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signature |  |  | Date |  |

|  |
| --- |
| FOR OFFICE USE ONLY |
| |  |  |  | | --- | --- | --- | | Approved\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Denied \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Scheduler’s Initials \_\_\_\_\_\_\_\_ | |  |  |  | | Pricing Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Determined by \_\_\_\_\_\_\_\_\_\_\_\_\_ | Date \_\_\_\_\_\_\_\_\_\_\_ | |

*Revised: November 2022*