



CONRAD PREBYS AZTEC STUDENT UNION MEETING SPACES STUDENT ORGANIZATION REGULAR MEETING RESERVATIONS REQUEST

Only SDSU Student Organizations with current on-campus recognition may request a regular meeting space with the Student Union. Union Programs & Services (UPS) will be following all deadlines set forth by Center for Student Organizations & Activities.

Completed Regular Meeting Reservation Requests will be accepted at Union Program & Services Friday, March 1st at 8:00 am, through Friday, March 29th, 2024 at 4:30 pm. Submissions will be drawn at random to determine the order in which Regular Meeting Requests will be processed.

Appointments to be scheduled with recognized student organization officers between April 8th to April 12th to review their assignment.

Requests must be submitted by one of the top five officers, as indicated by organizations listed in the SDSU Recognized Student Organization database (RSO). If the top five officer is not returning to their role for the following year, please include secondary contact information of another individual who is under "24 - 25 Officer's Name, Phone Number, and Email."

Fall 2024 - Spring 2025

Organization Name: _____

23-24 Officer's Name: _____

Phone Number: _____ E-mail: _____

24-25 Officer's Name: _____

Phone Number: _____ E-mail: _____

MEETING ROOM SETUP TYPE: Room assignments to be made based upon availability and regularly expected attendance.

Mark 1 next to first choice, 2 next to second choice: ☐ **Lecture** ☐ **Hollow Square**

Each meeting room has a set occupancy. Aztec Student Union staff will monitor and enforce all terms and conditions as set forth in Regular Meeting Reservation Agreements along with all Aztec Student Union Building Use Guidelines at all times. Organizations who violate these terms will jeopardize their current and future reservations.

Reservations for regular meetings will only be held during Academic Semesters. Meeting dates that fall under Holidays and/or outside of Academic Semesters will not be scheduled. In order to maximize the number of organizations and meetings per week, please specify the exact amount of time actually needed for your meeting. Organizations may not exceed more than 2 hours per week, with additional default 15 minute load-in and 15 minute load-out per meeting.

DATE AND TIME: (Please schedule for Fall 2024 - Spring 2025)

Start Date: ____/____/2024 (Space available beginning 9/2/24) **End Date:** ____/____/2025 (Space not available after 5/8/25)

DAY OF WEEK / RESERVATION TIME: (Meeting must start on the hour or half-hour)

FIRST CHOICE

Day of the Week: ☐ Sunday ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday

Start Time: ____:____ ☐ am ☐ pm (Not earlier than 8:00am) **End Time:** ____:____ ☐ am ☐ pm (No later than 9:30 pm)

SECOND CHOICE

Day of the Week: ☐ Sunday ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday

Start Time: ____:____ ☐ am ☐ pm (Not earlier than 8:00am) **End Time:** ____:____ ☐ am ☐ pm (No later than 9:30 pm)

REGULARITY: ☐ Weekly ☐ Every Other Week ☐ Monthly ☐ Other (specify dates) _____

REGULAR EXPECTED ATTENDANCE NUMBER: _____

AUDIO-VISUAL EQUIPMENT NEEDED: ☐ Yes ☐ No ☐ Hybrid

All rooms are equipped with built-in smart technology including a computer, display, sound system, and web camera/microphone. Clients can connect their personal device to the existing equipment in the room via "Mersive Solstice" app or built-in smart computer.

I understand that I will receive information regarding the status of our application via the contact information I have provided. I agree that the information is correct and I will not hold the Associated Students responsible if any messages to the contact information provided are undeliverable. I also acknowledge that it is our organization's responsibility to sign and return the Reservations Agreement to the Union Programs & Services Office 10 business days after receiving the agreement along with submission of Event Application System (EAS).

As an officer of our organization, I hereby state that the information provided in this request is accurate and understand that providing false information may result in forfeiture of our application.

Officer's Signature _____ Date _____