

Workshop Resource Request Form
(Dean's office approval required prior to holding a workshop using CEOAS facilities)

Name of Workshop: _____

Sponsoring/
 Supervising PI: _____, _____
Last First

Start & End Dates: _____

Lead Time/
 Tear Down Time: _____

Rooms to be used	Dates of Usage	Times of Usage
1.		
2.		
3.		

Other CEOAS Personnel Assisting in the Workshop:

1.		3.
2.		4.

Resources Required/Issues to be addressed (for each Yes, please specify below or with written attachment):
 No Yes

- Rooms to be wired with networking; how many drops _____
- Computers: type, networked or not, software, any special setup, workshop users bring own computers, etc.
- Computer peripherals: printers, scanners
- AV equipment: overhead projectors, slide projectors
- Telephone access: voice, data
- # Temporary User Accounts required and # of people attending _____
- Access to current CEOAS labs; specify _____
- Access to CEOAS fax/copy machines; specify _____
- Usage of CEOAS vehicles; specify _____
- Tours of CEOAS facilities: general CEOAS, ECC, R/V WECOMA
- Access to rooms via outside/staff doors; identify _____
- Secretarial support; specify _____
- Furnishings required; specify _____
- Any other special considerations _____

PI Signature: _____

Date: _____

CEOAS Dean's Office Approval: _____

Date: _____

INSTRUCTIONS: (1) PI submit application to Dean's Office
 (2) Dean's Office route approved application to CEOAS Facilities Mgr.,
 CEOAS Research Computing Services, and Research Publications/Outreach office