

HOOVER HIGH SCHOOL
ACTIVITY REQUEST FORM

Rec'd

- Submit completed request NO LESS THAN 3 WEEKS PRIOR TO DATE NEEDED.
- Fundraising activities must be approved by Herman Acosta, Financial Clerk & Maria Contreras, ASB President **FIRST**.
- Submit to Eileen Reynolds Murillo ereynoldsmurillo@sandi.net 619.344.4525

Today's Date: _____

1. **Staff:** _____ Organization Name: _____
Staff Sponsor – Phone Number _____ Email _____

2. **Event Name:** _____

3. **Date of Activity:** _____ Day of week: _____
Start Time: _____ End Time: _____ SET UP TIME: _____

4. **Location:** Auditorium (Aud. Faculty Initials: _____)
Big Gym or Small Gym (Athletic Director Initials: _____)
MPR: _____ Room 401(in library): _____ Room 408: _____ Library back area _____
Room 1103: _____ Mini Theater: _____ Other: _____

5. **Equipment Required:** How many chairs: _____ How many tables: _____
Roll-around lectern w/microphone: _____ Overhead projector: _____
Promethean Board: _____ Screen: _____ Other: _____
Podium w/microphone: _____

6. **Fundraiser:** no yes If YES must see Financial clerk for
procedures, forms & initials: _____ **ALSO NEED PRINCIPAL APPROVAL**

7. **Finance:** Estimated cost: \$ _____ Source of Funds: _____

8. **Description of Activity (circle one):** Academic Event Athletic Event
Class Asgmt./Project Clubs/Organization Student Event
Parent/Student Event Parent Group Performance Staff Mtg.
Community Event Testing Prof. Development
Other: _____

9. **Supervision:** How many adults? Campus Security? _____
Is Admin. Supervision required? Who? _____

10. **Declaration:** I am responsible for and will supervise this activity, use of facility, and clean up after event.

Staff/Faculty Sponsor _____ Phone # _____

Signature

Date: _____	A.S.B Student President	Approval: yes <input type="checkbox"/>	Denied <input type="checkbox"/>
Date: _____	A.S.B Staff Advisor	Approval: yes <input type="checkbox"/>	Denied <input type="checkbox"/>
Date: _____	Principal Approval: yes	<input type="checkbox"/>	Denied <input type="checkbox"/>
Notify: IT (Cerna) _____	Custodial (Shefcik) _____	Athletic Director (Granfield) _____	
Auditorium (Hue) _____	Other _____		
Event/C _____ Email confirmation to requestor: _____			