**NORTH FLORIDA COLLEGE**

**ROOM UTILIZATION FORM**

**1.) NAME OF REQUESTER** Signature

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First Name Last Name Request Date (\_\_\_\_\_-\_\_\_\_\_\_-\_\_\_\_\_\_\_\_)

Phone Number ( ) -\_\_\_\_\_\_\_ Department:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**2.) ROOM USE CODE**

Please list the current building and room number of the space in question. Also list what the space is currently utilized for and what you are requesting the room to be utilized for in the future.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Bldg. #** | **Room #** | **Current Use** | **Proposed Use** | **Current/New Code (Business Office Only)** |
|  |  |  |  |  |
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Notes: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**3.) APPROVAL SECTION**

Department Supervisor/Head Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

Institutional Research/Effectiveness Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

Dean of Administrative Services Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

President Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_