INTER-CLUB COUNCIL REQUEST TO HOLD AN ACTIVITY FORM 23-24

Club or SCC Student Organization Name: _____

This Form is for use by SCC student clubs and organizations only. Club Advisors MUST complete the Campus Reservation form and make the room/location reservation through the campus reservation system and attach the completed form to this Request. The campus reservation form requires a set up diagram, a list of items needed from facilities (tables, chairs, podiums, pop up canopies, etc.) The advisor MUST also contact the Help Desk if IT services are needed. A copy of the current Campus reservation form is attached. Failure to make the reservation prior to submission may result in denial of the requested activity.

Please PRINT the following information:

Club/Organization: _____**Type of Activity:** _____

Student Chairperson: _____ **(SCC ID#)_____ Phone:_____
Email address: _____
Other Students Actively involved in this activity-Names and Phone Numbers:

_____   _____   _____

_____   _____   _____

Advisor who will be present at the activity _____**(Phone Ext #)_____**
Advisor's Signature_____
Advisor's Email_____
PLEASE NOTE: ADVISOR'S PRESENCE AT ACTIVITY IS REQUIRED

Type of Activity (One Activity Per sheet) Please give specific details about events. Attach additional sheets if needed

_____
_____
_____

Date(s): _____   **Time(s):**_____   **Location:** _____

Set Up Time: _____   **Clean Up Time:** _____
List Materials/Supplies that you will need:
_____
_____
_____
be sure to complete a diagram on the attached ROOM RESERVATION FORM

This form must be received by the Office of Student Life in Room 1425 at least 8 days before the scheduled event.
Food Sales: Environmental Health Department Approval MUST be attached to this request.

Revised 1/4/24

Once the required activity has been approved, failure of the Club or organization to coordinate or manage the activity will result in cancellation of the event.

Club President: _____ Date: _____

Club Advisor: _____ Date: _____

CHECKLIST OF REQUIRED ITEMS:
_____Confirmation from **campusreservations@solano.edu**
_____Flyer for the Event

....

FOR STUDENT DEVELOPMENT OFFICE USE ONLY

Date Received by Student Development _____   (Staff Complete, Date and Initial All)

Scheduled on the Calendar _____

Posted on the Website_____

Posted on Canvas _____

Marked on Master Activity Log _____

Facilities Form Completed and Attached_____

Cash Box Requested _____

Club's Food Sale # _____

(4 food sales events allowed per year)

Health Dept. Contacted by Club Rep. and approved? _____

Approval attached? _____

DATE ACTIVITY APPROVED_____

ACTIVITY DENIED/REASON_____

By_____

SIGNATURE OF DIRECTOR OF STUDENT DEVELOPMENT

Revised 1/4/24