Brody Room Scheduling, Student Affairs – BSOM

- Please note that this is only a request. A confirmation email will be sent once the room reservation has been approved and assigned.
- Please do not publicize this event until after you receive a room reservation confirmation email.
- Have questions or need assistance? Call 744-2278 or send an email to tayloran@ecu.edu

**Description:**
Name of Event: _______________________________________________________________
Name of the Organization that is sponsoring this event: ________________________________
Approximate number of people attending: ___________________________________________

**Dates:**
One-time event:
Date: ______________________________________________________________________

Recurring event:
Start Date: ___________________________________________________________________
End Date: ___________________________________________________________________
Frequency: ___________________________________________________________________
(Describe daily, weekly, or monthly schedule)
Dates in range to exclude: _____________________________________________________
(Any dates in this range that your group will not meet – i.e. holidays)

**Times:**
Actual time of event: From___________________________ to __________________________
Set-up time needed:                         Break-down time needed:
☐ None                  ☐ None
☐ 15 minutes           ☐ 15 minutes
☐ 30 minutes           ☐ 30 minutes
☐ Other:______________  ☐ Other:______________

**Resources:**
Room requested:

**Brody Rooms**
☐ 2E100          ☐ 2W38          ☐ 2W38
☐ 2E69          ☐ 2W40A         ☐ TA – W290
☐ 2N53          ☐ 2W40B         ☐ TA – W347
☐ 2N55          ☐ 2W50          ☐ TA – W388
☐ 2N76          ☐ Auditorium (Blue) ☐ TA - W391
☐ 2N86 (M1)     ☐ Auditorium (Burgundy) ☐ **Ed Warren Rooms**
☐ 2S04 (M2)     ☐ Auditorium (Gold) ☐ LSB 202
☐ 2S11          ☐ Brody Corridor ☐ LSB 204
☐ 2S13          ☐ Lake Laupus
Resources Requested:
Tables:
   - Rectangle: #__________
   - Round: #__________

Others:
   - Chairs: #__________
   - Podium
   - Kitchen
   - Other: __________________

Media:
   - TV/VCR/DVD
   - Transparency Projector
   - LCD Projector
   - Microphone
   - Screen
   - Other: ______________

Room Set-up
   - Set up requested?  Yes______ or No________  (room set-up is primarily available for larger rooms)

   If yes, how would you like the room configured?
   - Lecture table style  (Tables and chairs are placed in rows facing the front, optimal for providing writing space for participants)
   - Round table style  (Round tables and chairs are spaced through out the room; optimal for small group and table discussions or for facilitating meals)
   - Lecture chair style  (Chairs are placed in rows facing the front)
   - Circle chair style  (Chairs are placed in semi-circle to facilitate group dialogue)

   ***If another set-up is desired, please attach a diagram of the set-up to this form***

Contact Information
Event Leader Name: ____________________________________________________________
                   (The person who will be in charge the day of the event)

Room Reservation Contact:  (the person we should contact if we have questions regarding this room reservation request.  This is also the person who will receive the room reservation confirmation email)
   Name: ________________________________________________________________
   Phone: __________________________________________________________________
   Email: ___________________________@ecu.edu