

# Division of Graduate Studies Event Order Form

Chris Jones • 541-346-8457 • cjones14@uoregon.edu

Event		
<b>Event Title:</b>		
<b>Description:</b>		
<b>Contact Person:</b>		
<b>Phone:</b>	<b>Email:</b>	
<b>Recurrence:</b>	One Time Event	Recurring
Details		
<b>Event Date:</b>	<b>Start Time:</b>	<b>End Time:</b>
<b>Room Preference:</b>	<input type="checkbox"/> Leona Tyler Conference Room <input type="checkbox"/> Graduate Student Center	
<b>Required Equipment:</b>	<input type="checkbox"/> Video Projection/Screen	<input type="checkbox"/> Other:
<b>Food &amp; Beverage:</b>	<input type="checkbox"/> UO Catering	<input type="checkbox"/> Alternate Caterer
<b>Food Preference:</b>		
<b>Event Notes:</b>		

In signing this form I am affirming I have read and understand the policies and guidelines outlined in the [Scheduling Procedures for the Graduate Student Center and Leona Tyler Conference Room](#) and agree I will be responsible for damages and/or extra staff time required for cleanup or in extreme cases the loss of use of these spaces if I am found out of compliance.

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

UO ID Number: \_\_\_\_\_

Signature: \_\_\_\_\_



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