

NEW MEXICO STATE UNIVERSITY
GRANTS CAMPUS

Facility Use Request Form

*Requests should be made at least two weeks in advance
and are subject to approval*

Name of Organization _____ Date _____

Contact Person Name _____ Work Telephone _____
Home Telephone _____
Fax Number _____

Mailing Address _____

Type of Activity _____

Number Attending _____

Date(s) Requested _____ Time [Access] is Requested _____

Classroom Theater Gymnasium Conference Room

Computer Lab ITV Dining Area Entrance Corridor

Maintenance Services (Security/Other) _____

Profit Organization Not-for-Profit Organization Community Organization

Please provide a copy of your 501(3)c if needed.

Approved _____ **Not Approved** _____ **Date** _____

Space/Room Assigned _____

Charge (if applicable) _____

VP for Academic Affairs Signature _____ Date _____

VP for Business & Finance Signature _____ Date _____

Facilities Manager Signature _____ Date _____

Please Attach a Work Order for Maintenance Services. Work Orders can be obtained from NMSU Grants administrative office.

cc: Business Office
Maintenance