

ROOM BLOCK OUT REQUEST

Department of Registration and Records
1000 Harris Hall

In the event that a classroom should not be assigned classes at certain times, this form must be completed to request a block out.

The requested block out times may be for administrative activities, such as departmental meetings, faculty presentations, or student "help" sessions. If a block out is approved, a copy of this request will be returned to your Departmental Scheduling Officer.

Please complete the following information and return to the University Scheduling Officer. This form may be duplicated for additional requests.

Room & Bldg.	Days for Block Out	Time Blocked Out	Reason:

****Block Out Requests are only valid through the last day of classes for the semester.**

(Department Signature) (Printed Name) (Date:)

Return to:
University Scheduling Officer
Registration and Records
Box 7313
Campus Mail

Approved: _____ Date: _____
(University Scheduling Officer)