## Facilities Work Request

- This form is for requesting work involving CCC facilities and equipment EXCEPT AUDITORIUM SOUND.
- AUDITORIUM SOUND needs must be requested on an Auditorium Sound Request form.
- Work to be done between Friday evening and Monday 10:00 A.M. must be requested by Thursday 4:00 p.м.
- This form does NOT reserve the room(s) needed. Rooms must be reserved in the Facility Reservation Book.
- Contact the Facilities Manager with any questions.

Please check and complete one of the following 3 options. This is a:
$\square$ One Time need to be completed by:
DATE TIME

Weekly need to be completed on:

| DAY OF WEEK TIME | START DATE | END DATE |
| :--- | :--- | :--- | :--- |

Other regularly scheduled need:
SCHEDULE
START DATE
END DATE
$\square$ Set up furniture in rooms:
See map on the back page of form.
ROOM NAME(S) OR NUMBER(S)
$\square$ Perform the following task: $\qquad$

Submitted by: $\qquad$ For (ministry or function):
YOUR NAME
MINISTRY OR FUNCTION NAME

Person to contact for further information:
NAME

WORK, HOME OR CELL PHONE
Place this completed form in the CCC office mail slot or in the Facility Manager's office mail box.
Pastors will receive a confirmed and scheduled copy back for their ministries if time allows.

## Facility Staff Response Use Only

Today's Date: $\qquad$
Reservation Checked
$\square$ N/A
$\square$ This task [will be] or [was] performed by:
FACILITY STAFF PERSON(S)
DATE/TIME
$\square$ There is a problem with this request: $\qquad$
$\qquad$
$\qquad$
$\qquad$


