Rec 1/10 gam



Master Calendar Event Request

Today's Date	e 1/10 Requested by: STEVE Albert
	: Phone Number: email:
What:	Name of Event: Admission/Ensollment Disaussion -
	Description of Event: <u>MT9</u>
When:	Start: 1112112 Time: 3:45 AMPM
	End: 1 121 12 Time: 4:30 AMPM
	Setup Time AM/PM Depart Time AM/PM (for trips)
	Breakdown AM/PM Return Time AM/PM (for trips)
Where:	Locations of Event: Board Room
	
Who:	SPS Groups Involved:
	Grade: 6 7 8 9 10 11 12
	Other Groups/Schools Involved:
	Total Number of Participants:
About:	Departments:
	Activity Type:
	Event Type:
	Equipment Needed:
	(i.e. table, chairs, electronic, technical, sound, etc.)
	Sporting event - Home Away (at:)
	Regular SET up - mate
	Sase it is Olean Documents to be Attached to file:
Events Coordinator	r Director of Studies IT Dept
	Maintenancescanned
Business Office	Coordinator(s) attach