

3/26-KL to verify times again

SANDIA PREP

Master Calendar Event Request

Today's Date 3/26/13 Requested by: Karen Lyall
Contact Phone Number: _____ email: _____

What: Name of Event: FCD - Prevention Program
Description of Event: 4 days of Substance Abuse Prevention Programs for Prep Community

When: Start: 4/15/13 Time: 8 AM/PM
End: 4/18/13 Time: 3:30 AM/PM
Setup Time _____ AM/PM Depart Time _____ AM/PM (for trips)
Breakdown _____ AM/PM Return Time _____ AM/PM (for trips)

see attached

Where: Locations of Event: Theatre (4-16: 10-11am, 4-17: 9:30-10:45am)
Health Board Rm (4-18 - 7:45-8:45am) Multi Purpose Rm 3:45-5:00 pm

Who: SPS Groups Involved: Lunch Boardroom 11:55-12:40pm
Grade: 6 ___ 7 ___ 8 X 9 X 10 X 11 ___ 12 ___
Other Groups/Schools Involved: faculty mtg, parent mtg
Total Number of Participants: ~350

About: Departments: Health & Wellness
Activity Type: _____
(i.e. Social event, Baseball, Soccer, chess club)

Event Type: _____
(i.e. assembly, game, practice, meeting, dance)

Equipment Needed: projector / screen / laptop
(i.e. table, chairs, electronic, technical, sound, etc.)
→ multi purpose room
→ Board Rm
→ Theatre

Sporting event - Home _____ Away _____ (at: _____)

Setup Instructions: chairs in multi-purpose Rm.

Documents to be Attached to file: detailed schedule

Events Coordinator _____ Director of Studies _____ IT Dept _____
Athletic Director _____ Maintenance _____ scanned _____
Business Office _____ Coordinator(s) _____ attach. _____