

**Mult-Purpose (Dance Room) Request Form**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Box Number: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

What is your specific request? \_\_\_\_\_

\_\_\_\_\_

Are you:

\_\_\_\_\_ An undergraduate student (year \_\_\_\_\_)

\_\_\_\_\_ An alumni

\_\_\_\_\_ A graduate student

\_\_\_\_\_ Work Study

\_\_\_\_\_ An outside organization/individual

\_\_\_\_\_ Non work study

Please answer the following questions:

1. Who will be offering/teaching the course? \_\_\_\_\_

\_\_\_\_\_

2. Do you offer it elsewhere? (please specify where) \_\_\_\_\_

\_\_\_\_\_

3. Are you charging for your services? How much? \_\_\_\_\_

\_\_\_\_\_

4. Is this your normal fee? If not what do you charge elsewhere? \_\_\_\_\_

\_\_\_\_\_

5. What are your credentials and experience? (If you have a resume, please attach)

\_\_\_\_\_

\_\_\_\_\_

6. Do you need access to any other room in the Kneller Athletic Center? (which room?)

\_\_\_\_\_

7. Is there a specific time slot you are requesting? \_\_\_\_\_

8. Please list alternate time slots. \_\_\_\_\_

9. What are starting and ending dates? \_\_\_\_\_

10. What do you anticipate class participation to be? \_\_\_\_\_

*Please attach any additional information we will need to consider your request and return this form to Clark University Athletic Department for consideration.*

**\*\*No classes will be scheduled or run in the Kneller Center without approval from the Athletic Department.\*\***