# Residential Hall Table Sit Request Form

## Requestor's Information

**Organization/Office/Group Name:**  
___________________________________________________________________

**Date(s):**  
_________________________________________________________________________________________

**Start Time:**  
____________________________________  
**End Time:**  
____________________________________

**Primary Contact:**  
________________________________________  
**Phone:**________________________

**E-mail:**  
________________________________________________________________________________________________

**Secondary Contact:**  
________________________________________  
**Phone:**________________________

**E-mail:**  
________________________________________________________________________________________________

## Requested Table Sit Locations:

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## Table Sit Approval Deadlines and Stipulations (Please initial next to each demonstrating your understanding):

1. Requests for campus wide table sits must be submitted to the Associate Director of Residential Life and Education for Staffing and Operations no fewer than 1 week prior to the scheduled drive start. Approvals are decided on a submission date where conflicting requests arise.

2. Residential Life will provide one (1) table to be utilized during a table sit which will be organized by the Custodial Supervisor of the area.

3. Table sits may be reserved by university departments and registered student organizations, outside businesses are not permitted to reserve tables in our residential communities.

4. Table sits are utilized to raise awareness, promote events, and engage students; solicitation of residential students is never permitted.

5. Residential Life reserves the right to end any table sits where there is a disruption to the community.

## Approval

**Associate Director for Staffing and Operations:**  
_________ Approve  
_________ Deny

**Signature:**  
______________________________________________________________________________  
**Date:**  
________________________________________