

**Application for Use of University Facilities-Public Expression Area Only
St. Cloud State University**

Sponsoring organization: _____ Today's date: _____

Contact person: _____ Phone: _____

Address: _____

E-mail address: _____

Event title: _____ Anticipated attendance _____

Event date(s): _____ Event time: _____ to _____

The PUBLIC EXPRESSION AREA is available Monday-Friday between 8 a.m. and 5 p.m. and may be reserved in 4-hour blocks.

LOCATION (select one):

Atwood Mall-between Atwood and Stewart Hall

PAC Mall-between Performing Arts Center and Atwood

Purpose of use of public expression area. Please be specific.

List of planned activities (e.g., speech, march, distribution of literature).

Equipment to be used.

Your signature: _____

Your signature above indicates that you have read the policies applying to use of this space and agree to abide by them.

Return this form to Conference and Scheduling Office, Atwood Memorial Center Room 110, St. Cloud State University, 720 Fourth Avenue South, St. Cloud, MN 56301-4498.

For questions, please call 320-308-2075.

Approvals completed:

Date _____

Staff initials _____

Security notified _____ (date and initials)

SLD Office _____ (date and initials)