



# Academic Innovation Center (AIC) Approval Request Form

This form is to be completed by a Bryant University Faculty or Staff member. Students who would like to use the AIC must have an advisor complete and process this form. To reserve the AIC: First, please check 25LIVE (25Live.bryant.edu) to make sure the AIC Forum, Classrooms and/or Breakout Rooms are available. Submit your request to reserve the space via 25Live. Your space is not confirmed booked until the AIC Approval Request form is reviewed and approved by the AIC staff. This form must be processed and approved at least one month prior to your event. For more information or to inquire about the use of the AIC space please e-mail [aicsupport@bryant.edu](mailto:aicsupport@bryant.edu).

Name of Event: \_\_\_\_\_

Course Name: \_\_\_\_\_ Course Number: \_\_\_\_\_

Description of Event: (Please indicate the specific academic nature of the event if not part of a course. Supplemental materials may be sent as an attachment to [aicsupport@bryant.edu](mailto:aicsupport@bryant.edu))

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact Person: \_\_\_\_\_

Department or Bryant Student Group Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Day of Week:     SUN.     MON.     TUES.     WED.     THURS.     FRI.     SAT.

Event Date: \_\_\_\_\_

Set up Time: \_\_\_\_\_    Event Starts: \_\_\_\_\_    Event Ends: \_\_\_\_\_    Clean up Time: \_\_\_\_\_

Number of Attendees: \_\_\_\_\_    Estimated Net Income Generated (*outside groups only*): \$ \_\_\_\_\_

**Will you need Audio Visual (A/V) Assistance?**     YES     NO

A/V Needed: \_\_\_\_\_

**Will you be serving food?**     YES     NO

**If yes, please indicate what type of meal/refreshments you will be serving:**

*Please note that all food and beverage must be served out of the café area.*

- Light Refreshments
- Buffet Meal
- Served Meal

**Which room(s) are you requesting for your event? Please check all that apply.**

**AIC Forum**

**Classroom(s): If yes, please indicate what classroom(s) you would like to**

Flat Classrooms (6) - Capacity 48    # of Flat Classrooms \_\_\_\_\_

Tiered Classrooms (5) - Capacity 50    # of Tiered Classrooms \_\_\_\_\_

**Breakout Room(s): If, yes please indicate what breakout rooms you would like to reserve.**

Breakout Rooms (23) - Capacity 6    # of Breakout Rooms \_\_\_\_\_

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Name of Event: \_\_\_\_\_

Contact Person: \_\_\_\_\_

## **AFTER APPROVAL PROCESS:**

Once your request is approved, this form will be sent to the AIC Office by the President's Office. All Audio Visual, room setups and facility needs will be handled by the AIC Office. Group will be responsible for informing the AIC Staff of all their event setup needs at least two weeks in advance.

Please Initial here: \_\_\_\_\_ This indicates that you have read the statement above.

It is your responsibility, as the requestor, to coordinate any food and beverage service. All Audio Visual, room setups and Facility needs will be handled by the AIC Office. Groups will be responsible for informing the AIC Staff of all their event setup needs at least two weeks in advance. Please note that all food and beverage must be served out of the Café area and is not allowed in the Forum or classrooms.

Please Initial here: \_\_\_\_\_ This indicates that you have read the statement above.

## **BRYANT UNIVERSITY OFFICE USE ONLY**

### **Signatures:**

It is required that your Department Division Head of your division to sign this form indicating his/her approval.

_____		<input type="checkbox"/> Denied	<input type="checkbox"/> Approved
<b>Department Head</b>	Date		
_____		Value Space: \$	_____
<b>Associate Director, AIC &amp; Academic Operations</b>	Date		
_____		<input type="checkbox"/> Denied	<input type="checkbox"/> Approved
<b>Director Faculty Development &amp; Innovation</b>	Date		
_____		<input type="checkbox"/> Denied	<input type="checkbox"/> Approved
<b>Divisional VP</b>	Date		
_____		<input type="checkbox"/> Denied	<input type="checkbox"/> Approved
<b>Dean</b>	Date		
_____		<input type="checkbox"/> Denied	<input type="checkbox"/> Approved
<b>Provost</b>	Date		
_____		<input type="checkbox"/> Denied	<input type="checkbox"/> Approved
<b>President</b> <small>(May require depending upon facility requested.)</small>	Date		

## **NOTES**