

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 WV DIVISION OF PERSONNEL
ORGANIZATION AND HUMAN RESOURCE DEVELOPMENT

Eric Householder
 Cabinet Secretary

1900 KANAWHA BOULEVARD, EAST
 STATE CAPITOL COMPLEX
 BUILDING 3, SUITE 500
 CHARLESTON, WV 25305
 TELEPHONE: 304-558-3950

Sheryl R. Webb,
 Director
 Division of Personnel

WVSTC RESERVATION REQUEST FORM

(Building 7 2nd Floor)

Room reservations are processed on a first-come, first-served basis. This form is only a request and does not guarantee a room until it is processed and confirmed by OHRD.

CONTACT INFORMATION			
Department/Organization	Division	Section	
Contact Person <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.	Address		
Job Title			
Telephone Number	Fax Number	Interdepartmental Mail:	Email
THIRD PARTY INFORMATION (IF APPLICABLE)			
Organization Name	Contact Person/Job Title <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.		
Address	Job Title	Email	
	Telephone Number	Fax Number	
EVENT DETAILS			
Name of Event (Official Name)			
Purpose of Event			
Date of Event	Please include Alternate Dates (if flexible)		
Event Start Time	*Need access before start time?	AM / PM	
Event End Time	*Need access after end time?	AM / PM	
<small>*Events that take place after regular working hours (8am-5pm, Monday-Friday), or on a State Holiday – User must receive approval from Division of Protective Services 304.558.9911. Additional fees may be involved.</small>			
Maximum number of people expected to attend event:	Estimated security checkpoint time/s:		
ROOM DETAILS			
Location Requested (check all possible options AND/OR please specify preference):			
<ul style="list-style-type: none"> <input type="checkbox"/> Executive Room - Specs: 20'L x 19'W; Table; Chairs; Maximum of 15 people 75" Screen; Wireless Internet Access <input type="checkbox"/> Regents Room - Specs: 40'L x 20'W; Tables; Chairs; Maximum of 25 people Ceiling Mounted Projector; Projection Screen; Wireless Internet Access <input type="checkbox"/> Capitol Room - Specs: 74'L x 40'W; Tables; Chairs; Maximum of 120 people (or 80 with tables) 2 Ceiling Mounted Projectors and 75" Screens; Wireless Internet Access 			

Please list any equipment that you will be providing and using during your event:

Room Setup Options (*MUST BE COMPLETED) (Please place a check mark next to the setup you are requesting)	Available Equipment (Please place a check mark next to all items you intend to use)
<ul style="list-style-type: none"> .. Conference/Hollow Square (<i>for Capitol Room: up to 50</i>) .. U-Shape (<i>for Capitol Room: up to 40-45</i>) .. Theater (<i>Chairs Only</i>) .. Classroom .. Group (<i>for Capitol Room: 4 OR 8 per group—circle preference—up to 64</i>) .. Head Table/s .. Registration Table/s .. Special Arrangement (Please attach description/diagram) <p style="text-align: center;">(Please see attached diagram for more details)</p>	<ul style="list-style-type: none"> .. Projection System .. Wireless Internet Access .. Podium .. Microphone .. DVD <hr style="width: 100%;"/>

BY SIGNING THIS REQUEST FORM, THE USER HAS COMPLETELY READ AND UNDERSTOOD THE WV STATE TRAINING CENTER GUIDELINES AND AGREES TO COMPLY AND BE BOUND BY THE TERMS OF SUCH AGREEMENT. A USE AGREEMENT MUST BE ON FILE WITH OHRD BEFORE CONFIRMATION OF RESERVATION WILL BE GRANTED.

AUTHORIZED SIGNATURE (USER)

PRINTED NAME AND JOB TITLE

DATE SIGNED

**SUBMIT COMPLETED FORM WITH SIGNATURE VIA EMAIL, FAX OR MAIL TO THE ATTENTION OF:
 THE WVSTC FACILITY SCHEDULER**

EMAIL: DOP.Registrar@wv.gov
PHONE: 304-414-1857

MAIL: WV DIVISION OF PERSONNEL, OHRD
1900 KANAWHA BOULEVARD, EAST
STATE CAPITOL COMPLEX, BLDG. 3, Suite 500
CHARLESTON, WV 25305

OHRD OFFICE USE ONLY

Received: Database: A / D Letter:	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; border-bottom: 1px solid black;"> _____ Authorized Signature (OHRD) </td> <td style="width: 50%; border-bottom: 1px solid black;"> _____ Date Signed </td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black;"> _____ Printed Name and Job Title </td> </tr> </table>	_____ Authorized Signature (OHRD)	_____ Date Signed	_____ Printed Name and Job Title		Comments:
_____ Authorized Signature (OHRD)	_____ Date Signed					
_____ Printed Name and Job Title						