



Audio Visual Request Application

City East City West Magill Mawson Lakes Whyalla

Booking Details:

Day/Date Equipment required:

From: To: Room Number:

Name of Meeting/Tutorial/Lecture:

Name of person making request:

Division/School/Unit Phone No Fax No.

Email Address:

Student ID No. Students will be required to leave their Student ID Card with FM Assist as security on borrowed items.

Equipment Required:

Notebook/Data Projector Projection Screen Tripod

Slide Projector Whiteboard OHP

Mic, Speaker & Stand TV & VCR Portable DVD

Electronic Whiteboard**

**Incurs a \$10 Charge

Details of other/special requirements:

Authorisation:

I agree to be the sole person responsible for the equipment and agree that my Division/School/Unit cost centre will be responsible for any damages and losses resulting from the use of the equipment listed on this form.

Items will be deemed lost or stolen if not returned or located within three (3) days of the return due date.

Student Signature:

ACCOUNT CODE

AD PG SR TN PD SUB LEDGER (circle) Other PD Only Cost Centre Item

Staff Signature: Staff Name: