

## Semel Institute/Resnick Hospital Audio Visual Services Request Form

Email: semelav@mednet.ucla.edu, For all A/V services including A/V Equipment (Laptop/Projector/TV/VCR/Adapters) & any A/V-related questions

Special Requests: LiveStreaming, Video Conferencing, Recordings, Uploading Videos for viewing, Phone Conferencing

For more information on making a reservation or usage policies/procedures, contact Ernie Vazquez, semelav@mednet.ucla.edu, 310-948-0643

This form may be submitted via email or by drop-off in Staff Human Resources, Semel B7-370. Requests must be submitted at least 24 hours in advance.

<b>Department</b>					<b>For AV Services Use ONLY</b>		
<b>Billing Info</b>	FAU		Recharge ID				
<b>Event Name</b>							
<b>Instructor / Client</b>	First Name		Last Name				
	Phone #		Office (Building & Room)				
E-Mail Address							
<b>AV Order Requested By:</b>	First Name		Last Name				
	Phone #		Office (Building & Room)				
E-Mail Address							
Event Location (300 MP, Semel Institute, CHS, RNPB, NRB, MRL & Gonda only):	Building		Room #			<b>Sales &amp; Service</b>	
<b>Dates</b>	<b>Start Time</b>	<b>End Time</b>	<b>Setup Time</b>	<b>Equipment Requested</b>	<b>Service Category</b>	<b>Rate</b>	
<b>Delivery Preference ('X' One)</b>	Requestor Pick-up <input type="checkbox"/>	A/V Set/Strike <input type="checkbox"/>	Afterhours/Weekend Request <input type="checkbox"/>				

Note: Picture ID is required for all Requestor/Department pick-ups

**Room reservation does not automatically include A/V assistance. To request A/V assistance, please submit an A/V Request Form via semelav@mednet.ucla.edu. There is no A/V reservation until you receive an E-mail confirmation. If confirmation hasn't been received within 24 hours, please contact Ernie Vazquez at semelav@mednet.ucla.edu.**

**Please be present at the requested scheduled event setup time. If no one is present for the scheduled event start time, the A/V Staff will stay no longer than 5 minutes after the event start time. The requestor is responsible for notifying the A/V Staff as to any changes to the event. If the A/V staff leaves and is contacted to return, there is no guarantee of A/V assistance due to a busy A/V schedule.**

**Please be advised that the requestor and their department accepts full responsibility for any equipment that is damaged or stolen while in their possession. The requestor is responsible for the equipment from the start to the end time requested and will ensure the equipment is properly secured until equipment can be picked up. The requestor is responsible for notifying the A/V Staff as to any changes in event time so arrangements can be made for equipment pickup.**

**For Evening/Weekend bookings, equipment will placed under the care of the booking department and must be placed in locked, overnight storage. Any damages or theft of equipment while under the booking Department's care will be replaced/repared using the funding information provided by the Department/Center.**

**Please note, by submitting this A/V Request Form, you have agreed to all stipulations put forth by the A/V Department. A full list of the A/V Policies can be requested through the A/V Department at semelav@mednet.ucla.edu.**

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Center Director (Print Name)

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Center Director Signature

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Department Administrator (Print Name)

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Department Administrator Signature