## **AUDIO VISUAL SERVICES REQUEST FORM**

Please be advised, **ALL** orders must be submitted by **FACULTY/ADMIN/STAFF** at least **ONE WEEK** in advance. **NO** email, phone, fax or interoffice mail orders will be accepted.

AVS HOURS: Monday-Thursday 8AM - 9PM & Friday 8AM - 5PM LOCATION: Pratt Bldg - Rm 325 TO DOWNLOAD FORMS: www.liu.edu/Brooklyn/About/Offices/AVS PHONE: 718-488-1348

Time

**Select Building** 

**Deliver to Room** 

//	Monday Tuesday Wednesday Thursday Friday	FROM: am/pm  TO: am/pm	Health Science Humanities LLC Main Pharmacy Pratt WetLab WRAC  Phone Extension	Pickup from Room  Additional Contact	
Instructor's Name		Department/Organization	Phone Extension	Additional Contact #	
Person Filing Request		Budget # (for Special Events only)	Date Filed	AVS Approval	
[ ] Check Here for MULTIPLE DATES  [ ] Check Here for PERMANENT ORDER  CHECK OFF EQUIPMENT NEEDED  Delivery and Set Up Facilitated Unless Otherwise Indicated					
( ) DVD/VHS Player & 32" LCD TV  ( ) Multimedia Projection Cart  *Projector for those with their own Laptop. Set up includes: Multimedia Projector, DVD/VHS Combo & Sound System. Check additional needs:  Internet Sound Wireless PowerPoint Presenter		*Check your needs:  ( ) Video Camera  MiniDV er	( ) <u>LLC515 Smart Room Set Up</u> (In Room System):  *Check your needs: PC DVD Lavalier Mic  ( ) <b>Video Camera</b> - <b>SELF PICKUP</b> *Check desired format:  MiniDV Hard Disk USB FlipCam		
( ) Smart Cart  *Set up includes: Computer, Multimedia Projector, DVD/VHS Combo & Sound System. Check additional needs:  Internet Wireless PowerPoint Presenter  ( ) Overhead Projector - SELF PICKUP  ( ) 35mm Slide Projector - SELF PICKUP *Check additional ne Tray  ( ) Large Format Computer Monitor *Check desired size:		( ) Digital Camera  ( ) Tripod - SELF PIG  ( ) Standing Projection	( ) Digital Camera w/ Memory Card (Still Pix) - SELF PICKUP ( ) Tripod - SELF PICKUP ( ) Standing Projection Screen ( ) CD/Cassette Player - SELF PICKUP ( ) Digital Voice Recorder [USB] - SELF PICKUP eeds: ( ) Spotlight - SELF PICKUP ( ) Public Address System *Indicate # & type of mic (s) required:     # of MICs [max 4] Desk Stand Floor Stand		
		nal needs:  ( ) Spotlight - SELF  ( ) Public Address			
32"42"46"50" ( ) Other			( ) Other		
Please Sign:		Date:_			

\* PLEASE READ: Upon signing the request form you agree to these terms. Please remember that you and your department will be held accountable for damaged or missing items. In order to prevent further theft or damage of equipment, please do not leave any smart carts, projectors, laptops, etc unattended. If a class is cancelled, ends early, or if there is a room change please contact us ASAP (extension # 1348) and have a responsible person stay with the equipment until it is picked up by AVS. If it is not possible for someone to remain in the classroom until AVS arrives, please either return the cart to our office (Pratt 325) or bring it to a secure location and inform us where it can be found. We thank you for your cooperation.

Date (s) Needed

**Select Day**