

Event Check List CHECK IT



Teachers, please use the following check it form when planning an event. This is for any event for students and/or community members. When planning this event, the following information must be provided to your Building principal two weeks prior to the event.

Name of Event _____ Date of Event _____
Set up Time _____
Location of Event _____ Time of Event _____
Group Planning Event _____ Form submitted by _____

Custodian Needed: ____Yes ____No If yes, fill out this section.....
Duties custodian needed for (tables, chairs, bleachers, etc.) _____

Door Info: Exterior Door No. to Unlock ____ Time to Unlock ____ Time to Lock ____
Interior Door to Unlock _____ Time to Unlock ____ Time to Lock ____

Explain how decorations will be used (if applicable) _____

Explain how you plan on using technology (if applicable) _____

Have arrangements been made for use of technology and setup? _____

What supervision will be used at the event? (Names and responsibilities) _____

What are the expectations of the non-involved students during the event? _____

(The administration is there for the overall supervision of the event. They will watch the event and address issues the supervisors can't handle. We expect all non-participating students to demonstrate respectful behavior during the event.)

Administrator Signature _____

For central office use only:	
Turned in 2 Weeks Prior: Y ____ N ____	Approved ____ Denied ____
Superintendent Signature _____	Date _____