
Distance Learning Program Reservation Form
2004-2005 School Year
At least 48 hours notice prior to your event is always appreciated!

Name: _____ Today's Date: _____

School/Organization: _____

Address: _____

E-mail address: _____

Fax number: _____

Program title: _____

Date program begins: _____

Date program ends: _____

Time program begins: _____

Time program ends: _____

The following schools are included in this program session:

Host site: _____

Receive sites: _____

I have confirmed the use of these classrooms for the above dates and times with the appropriate building administrator. Yes ☐ No ☐

Comments:

Fax completed form to Eileen Drescher at (518) 862-5305 or e-mail information to edresche@gw.neric.org

For Official Use Only:

Job request number _____ Initials _____ Date entered _____



Help Desk 1-888-427-9173