

**REQUEST FOR SOUND**  
University of California, Irvine  
Student Center & Event Services  
A311 Student Center, Irvine, CA 92697-2050  
(949) 824-5252  
www.studentcenter.uci.edu

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_  
 Registered Campus Organization     Campus Department     Off Campus Organization

Event Day/Date: \_\_\_\_\_ Requested Location of Event: \_\_\_\_\_

Event Time: \_\_\_\_\_ Requested Sound Time Period: \_\_\_\_\_

Event Title: \_\_\_\_\_

Event Description: \_\_\_\_\_

Purpose of Event: \_\_\_\_\_

Expected Attendance (how many): \_\_\_\_\_ Expected Audience (who): \_\_\_\_\_

Types of Sound: \_\_\_\_\_

Reason Sound is Needed: \_\_\_\_\_

How will the event be advertised?: \_\_\_\_\_

**Approving Authority Use Only:**

Reservation#: \_\_\_\_\_ SCES Planner: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Academic Class/Campus Event Conflicts: \_\_\_\_\_

**Review Signatures:**

Approved      Approved Time Period: \_\_\_\_\_       Not Approved

\_\_\_\_\_  
Venue Representative/Scheduling Contact      Date

\_\_\_\_\_  
Amy Schulz, Director, Student Center & Event Services      Date

\_\_\_\_\_  
Brice Kikuchi, Associate Vice Chancellor, Student Affairs      Date

Notifications: \_\_\_\_\_

I agree to adhere to the above approved dates, times and locations of sound. Any violation of the approval above may result in revocation of future approved dates and non-approval of future requests. Any sound complaints received during this event may result in the need to reduce sound levels and may affect the approval status for future events and requests.

Acknowledgement of Agreement by Applicant: \_\_\_\_\_  
Applicant Signature      Date