

OAKLAND UNIFIED SCHOOL DISTRICT

APPLICATION FOR USE OF SCHOOL FACILITIES FOR PUBLIC PURPOSES UNDER THE CIVIC CENTER ACT

955 High Street Oakland Ca. 94601

PH: 510-535-7066 Fax: 510-535-7067

1 FACILITY NAME: _____ **DATE** _____

2 USER IDENTIFICATION:

NAME OF GROUP/ORGANIZATION _____

NAME OF GROUP MEMBER MAKING REQUEST _____

ADDRESS (MAILING) _____ CITY _____ ZIP _____

TELEPHONE NO. HOME _____ WORK _____ EXT _____ FAX NO. _____

CELL PH. NO. _____ EMAIL _____

OPTIONAL CONTACT _____ PHONE NO. _____ NO. OF PARTICIPANTS _____

NATURE OF ACTIVITY TO BE CONDUCTED _____

3 FACILITY/EQUIPMENT REQUESTED:

INDOORS

☐ CLASSROOM QTY _____

ROOM No(s). _____

☐ MUSIC ROOM

☐ THEATER

☐ BAND ROOM

☐ EXERCISE ROOM

☐ COMPUTER ROOM

☐ GYM

☐ MULTIMEDIA LAB

☐ FOOD SERVICE

☐ LIBRARY

☐ KITCHEN

☐ AUDITORIUM

☐ CAFETERIA

☐ CONFERENCE ROOM

☐ LUNCH ROOM

☐ OTHER _____

OUTDOORS

☐ FOOTBALL FIELD

☐ TRACK

☐ BASEBALL FIELD

☐ PRACTICE FIELD

☐ FIELD A

☐ FIELD B

☐ TENNIS COURT

☐ POOL

☐ PLAYGROUND

☐ PARKING

OTHER: _____

name=

TYPE OF EQUIPMENT

☐ P.A. SYSTEM IN GYM

☐ P.A. SYSTEM AUDITORIUM

☐ SCORE BOARD/TIME CLOCK

☐ PIANO

☐ CHAIRS QTY _____

☐ TABLES QTY _____

☐ NEED SETUP ☐ YES ☐ NO

☐ RESTROOM ☐ YES ☐ NO

FOR OFFICE USE ONLY

Custodial Start Time: _____

Custodial End Time: _____

Custodial Total Hrs. _____

4 USAGE INFORMATION:

SINGLE ☐

DAYS OF USE

WEEKLY ☐ ☐ M ☐ TU ☐ WE ☐ TH ☐ FR ☐ SA ☐ SU

MONTHLY ☐

DATES OF USE

_____/_____/_____
_____/_____/_____
_____/_____/_____

HOURS OF USE (Please specify AM or PM)

_____/_____/_____
_____/_____/_____
_____/_____/_____

Actual Event Hours

_____/_____/_____
_____/_____/_____
_____/_____/_____

TOTAL
HR(s)

DECLARATION

We agree to conform to all the rules and regulations and the Board Policy And Admittance Regulations of the Oakland Unified School District.

The undersigned states that, to the best of his or her knowledge, the school property for use of which application is hereby made will not be used for the commission of any act intended to further any program or movement the purpose of which is to accomplish the overthrow of the government of the United States by force, violence or other unlawful means.

That _____, the organization on whose behalf he or she is making application for use of school property, does not, to the best of his or her knowledge, advocate the overthrow of the government of the United States or of the State of California by force, violence, or other unlawful means, and that, to the best of his or her knowledge, it is not a Communist action organization or Communist front organization required by law to be registered with the Attorney General of the United States. This statement is made under the penalty of perjury.

SIGNATURE OF GROUP MEMBER ASSUMING RESPONSIBILITY _____ DATE _____

PRINT NAME _____

5. SCHOOL USE ONLY:

☐ APPROVED ☐ DENIED

COMMENTS _____ DATE _____

ASST. SUPT.

☐ APPROVED ☐ DENIED

PRINCIPAL SIGNATURE _____

COMMENTS _____ DATE _____

SUPT. SIGNATURE _____