



Sam Houston State University  
 Facilities Management  
 Building Schedule Form

**Please give 48 hours notice**

Services to be notified (please check all that apply)

- Bld Access
- Heating/Cooling
- Custodial
- Electrical

**FROM**

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

PHONE: \_\_\_\_\_

FAX: \_\_\_\_\_

**INSTRUCTIONS**

Please return to:

Customer Service  
 SHSU Box 2357  
 Fax 294-3554

[facilitiescustomerservice@shsu.edu](mailto:facilitiescustomerservice@shsu.edu)

FUNCTION	BLD/RM	DATE	TIME	CONTACT/EXT

**PROCESSED**

\_\_\_\_\_  
Date Received

\_\_\_\_\_  
Staff Signature