RTCC Facilities Request



Use the TAB key to navigate through form.

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| Event Title: | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Start Date: | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | End Date: | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| Start Time: | |  | | | | | | | | | | | | | | | | | End Time: | | | | | | | | |  | | | | | | | | | | | | | | Number of Participants: | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| Event Contact: | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Employee #: | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| Office Phone #: | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Cell Phone #: | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| Add’l Contact: | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Cell Phone #: | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| # of Presenters/Facilitators/Instructors: | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | Student Manuals: | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| Does any part of this event require course history? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | Course #: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Lodging Required?** Onsite dormitory-style lodging is available at RTCC. To secure reservations, send your request to [rtc-lodging@shell.com](mailto:rtc-lodging@shell.com). Accommodations and payment of offsite accommodations is the responsibility of the individual. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Cost Center:**  (*please choose one)* | | | | SEPCo - Overhead | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Needs to be **6** digits. | | | | | | | | |
| SEPCo – Network/Activity | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Needs to be **12** digits. | | | | | | | | |
| SEPCo – WBS Element | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Needs to be **18** digits. | | | | | | | | |
|  | | | | If not SEPCo, what Shell Company? | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | Cost Center: | | | | | | | | |  | | | | | | | | | | | | | | |
| PLEASE NOTE THAT YOUR OVERHEAD COST CENTER WILL BE USED IF NONE IS PROVIDED ABOVE. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Classroom Requirements** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Classroom Setup: | | | | | | | | | | U-Shape: | | | | | | | | | | | |  | | | | | | | Classroom: | | | | | | | | |  | | | | | | | | | | Pods: | | | | | | | | | |  | | | | | | | |  | | | | | | | | | | | |
| Flip Charts #: |  | | | | | | | | | | | Name Tents: | | | | | | | | | | | | | |  | | | | | | Name Badges: | | | | | | | | | | | | | |  | | | | | Pencils: | | | | | | | | | |  | | | | | | | Note Pads: | | | | | |  | | | |
| Break-Out-Rooms #: | | | | | | |  | | | | | | | | | | Add’l Tables Req’d #: | | | | | | | | | | | | | | | | |  | | | | | | Placement: | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Special Setup Notes: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **IT/Audio/Visual Requirements**  RTCC IT Support can be reached at 985-543-1211 for special requests and assistance. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Laptops Required #: | | | | | | | |  | | | | | | | | | | Network Cable: | | | | | | | | | | | | | | |  | | | | | | Surge Protector: | | | | | | | | | | | | | | | |  | | | | | | | | | | LCD Projector: | | | | | | | | |  | | | |
| Using Own GID Laptop: | | | | | | | | | | | | |  | | | | | | | | Model: | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Using Own Non-GID Laptop: | | | | | | | | | | | | | | | | | |  | | | | | | NOTE: Laptop must have a VGA Port. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Microphones #: | | | | | | | | | | | | | | |  | | | | | |
| Electronic Easel: | | |  | | | | | | | | | | | Video Camera: | | | | | | | | | | | | | |  | | | | | | | | | Video Conference: | | | | | | | | | | | | | | |  | | | | | Conference Phone: | | | | | | | | | | | | | | |  | | | | | |
| TO INSURE QUALITY VIEWING, WE RECOMMEND ONSCREEN PRESENTATIONS BE BROUGHT TO RTCC ON A FLASH DRIVE OR EXTERNAL HARD DRIVE. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Special Services** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bottled Water (# Cases): | | | | | | | | | | | | |  | | | | | | | Fruit/Cheese Tray: | | | | | | | | | | | | | | | |  | | | | | AM | | | | | |  | | | | | | PM | | | Cookies: | | | | | | | | |  | | | | | | AM | |  | | | | PM |
| Special Lunch Time: | | | | |  | | | | | | | | | | Special Lunch: | | | | | | | | | | | |  | | | | | | | | Details: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| After-Hours Social: | | | | | |  | | | | | | | | | | Time: | | | | | | |  | | | | | | | | # Attending: | | | | | | | | | | | | |  | | | | | Hors d’oeuvres: | | | | | | | | | | | | | | |  | | | | | | Alcohol: | | | | |  | | |
| Special Dinner: | | | | | |  | | | | | | | | | | Time: | | | | | | |  | | | | | | | | # Attending: | | | | | | | | | | | | |  | | | | | Tent Req’d: | | | | | | | | | |  | | | | | | | | CD/DVD Player: | | | | | | | | |  | |
| Special Dietary Needs: | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| \*PLEASE LET US KNOW IF ANY SHIPMENTS WILL BE SENT TO US FOR YOUR EVENT AND HAVE THEM LABELED WITH EVENT NAME AND DATE. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Other Needs** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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For a map to RTCC and other useful information, visit our website at [www.shell.us/training](http://www.shell.us/training).

Please forward completed form to Nancy.McDonald@shell.com