



LOS ANGELES UNIFIED SCHOOL DISTRICT
REQUEST FOR FACILITIES USE

For Office Use Only
Date rec'd _____
Reviewer _____
Date forwarded _____
CC _____ LASU _____ RM _____

Requests must be received no later than 15 Business days before the first day of your requested use.

I. **APPLICANT INFORMATION**

Date: _____

Please indicate your organization type below and fill in the required applicant information.

FOR LAUSD SCHOOLS OR OFFICES, PROP 39 /CO-LOCATED CHARTERS (only):

- ☒ LAUSD School or Affiliated Charter ☐ Prop 39 / Co-Located Charter School
☐ LAUSD Board Member or District Offices

School/Office Name: ABRAHAM LINCOLN HIGH SCHOOL

Mailing Address: 3501 NORTH BROADWAY, LOS ANGELES, CA 90031

Street Address, City, State and Zip Code

LAUSD Contact Person: ROSE ANNE RUIZ

E-mail: rvr8954@lausd.net

Phone: (323) 441-4600

Fax: (323) 223-1291

Will this event/activity be co-sponsored by other organizations? ☐ YES ☒ NO

Please list additional sponsors here: _____

OTHER APPLICANTS:

- ☐ Civic or Service Group or one of the following groups: i.e. Boy Scouts, Girl Scouts, Camp Fire Girls, Good News Club or School Advisory Councils
☐ Other Schools or Private Schools ☐ PTA / PTO / Booster ☐ Individual
☐ Public or Governmental Agency ☐ Religious Organization ☐ Company / Corporation
☒ Neighborhood Council ☐ Non-profit with 501(c)(3) (Number # _____)
☐ Off-Season Coach ☐ Other (describe) _____

Organization Name or Applicant: LINCOLN HEIGHTS NEIGHBORHOOD COUNCIL

Mailing Address: 3516 NORTH BROADWAY, Los Angeles, CA 90031

Street Address, City, State and Zip Code

Contact Person: SELENA ORTEGA

Website: www.lincolnheightsNC.org

Driver License or ID# D6805459

State where license/ID was issued? CA

Phone: (323) 919-4301

Fax: ()

Cell: ()

Email: selena.lhnc@gmail.com

II. **SCHOOL WHERE EVENT/ACTIVITY WILL TAKE PLACE:**

- a. 1st choice ABRAHAM LINCOLN HIGH SCHOOL School Contact & Title: ROSE ANNA RUIZ- PRINCIPAL
b. 2nd choice* _____ School Contact & Title: _____
(*2nd choice required only if applying for a recreational permit)

III. **EVENT/ACTIVITY DESCRIPTION**

(a) Please mark an "X" in the columns to the right to indicate your responses to the questions

1. Will this event occur during school hours?
2. Will any District or Student Body funds be used?
3. Will you charge for the sale of products or fees for services?
If YES, how much per person? \$ _____ Per day \$ _____ Per week \$ _____
4. Will any fees, admissions or donations be charged or collected for this event/activity?
If YES, how much per person? \$ _____
What are funds used for? _____

YES	NO
<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>

Describe intended event, program or use in detail (Use separate sheet if necessary.) Please attach corroborating information such as copy of flyer or advertising, list activities, detailed agenda or schedule and event itinerary.

The Lincoln Heights NC is planning a candidate forum for the upcoming Council District #1 Elections. The event would host the two candidates running: Eunisses Hernandez and Gil Cedillo.

The event is projected for May 13, 2022 from 5:00 p.m. - 08:00 p.m. Residents from Lincoln Heights will be invited.

(b) Will any of the items or categories below be a part of the intended event? (Check all activities applicable to your event.)

- ☐ Animals ☐ BBQ ☐ Fireworks ☐ Fundraiser ☐ Festival/Fair/Carnival ☐ Inflatables/Jumpers
☐ Childcare/Enrichment ☐ Cultural activities ☐ Religious services ☐ Concert/performance
☐ Recreational sports ☐ Recreational camp/clinic ☐ Summer/winter/spring camp
☐ Beautification Event (i.e. gardening, tree planting, murals or painting, campus clean-up)
☒ Meetings - Check One: ☒ Open to the Public ☐ Closed to the Public or by invitation only
 Topic to be covered: Council District 1 Upcoming Elections

(c) Will there be food / food concessions at event? ☒ YES ☐ NO

If YES, ☐ Pre-packaged food ☐ Catering ☐ Food Trucks

☒ Other (explain) Coffee, bottled water and basic pastries

IV. **REQUESTED DATE(S) / TIME(S):** You may attach additional sheets if necessary.

	Event/Program Dates		Times		Specify days of use (i.e. daily, only Mondays)
	From:	To:	From:	To:	
Date(s):	May 13, 2022	May 13, 2022	05:00 p.m.	8:00 p.m.	one day only (3 hours)
Date(s):					
Date(s):					
Rehearsal					
Set-up					
Tear-down					

V. **ATTENDANCE: Participants/Spectators:**

- (a) Number of participants 8 (b) Number of spectators 50
 (c) Will minors (individuals under the age of 18 years old) be participating in this event? ☒ YES ☐ NO
 (d) What percentage of participants live within boundaries of LAUSD? 100%

Youth Group Applicants Only:

- (a) Has the applicant submitted, along with this application, a list of the group's representatives who will be on site during meetings, on this campus(es)? ☐ YES ☐ NO
 (b) The Applicant understands and agrees that the youth group and its representatives are authorized to access the facility noted in this application but not authorized to access any other areas of the campus. ☐ YES ☐ NO

VI. **REQUESTED FACILITIES:**

Check all facilities to be used:

• **Indoor Facilities:**

- ☒ Auditorium ☐ Classrooms, number of classrooms _____
☐ Cafeteria Dining Area only ☐ Library ☐ Multipurpose Room
☐ Other (please specify) _____

• **Recreational Facilities:**

- ☐ Gymnasium ☐ Middle School Gym
 (Check appropriate school/gym size if applicable) ☐ High School Gym: ☐ Small ☐ Large
☐ Football Field ☐ Soccer Field ☐ Tennis Courts ☐ Track Field
☐ Swimming Pool ☐ Baseball/Softball Diamond ☐ Other _____

• **Outdoor or Other Facilities:**

- ☐ Outdoor Lunch Area ☐ Playground/Blacktop ☐ Quad
☐ Other _____

VII. Parking/Parking Operations:

NOTE: Availability of parking or sufficient parking to accommodate your use during any event is not guaranteed and is at the discretion of the school or District office.

- (a) Check all areas to be used for parking: ☒ Street Parking ☐ Parking Lot ☐ Playground / Blacktop
i. Parking will be (check one): ☒ **SELF PARKING (no parking operator)**
☐ **PARKING OPERATOR/VALET COMPANY**
ii. If the applicant is not a parking operator, please provide the name of the company providing services here: _____ (NOTE: Parking operator will also be required to provide insurance.)
iii. Will shuttle services be provided? ☐ YES ☒ NO Operator Name (if different from above): _____
(b) Number of cars anticipated? 30
(c) Will a fee be charged to park? ☐ YES ☒ NO
If YES, how much per vehicle? \$ _____ Per day \$ _____ Per week \$ _____

VIII. Will District equipment be required? Describe below (Audio visual, lighting, tables, chairs, etc.) ☒ YES ☐ NO (Applicant must request the use of furniture and equipment with the school administrator. Additional fees may be required to be paid for rental of equipment and technical services.)

We are requesting a PA system and microphone/ stand

IX. Insurance Requirements

See page 4 for Standard Insurance Requirements which are subject to change. Actual insurance requirements will be determined by the nature and scope of your event or activity.

By signing below, the Principal, Administrator or applicant represents that the information provided in this Request for Facilities Use is true and correct. Misstatements, misrepresentations or omissions may cause cancellation, delay or refusal of this facilities use request.

FOR LAUSD School/Office/Prop 39/
Co-located Charters events
PRINCIPAL / ADMINISTRATOR SIGNATURE:

Signature and Date

PRINT NAME and TITLE

Name of School or Office

FOR OTHER APPLICANT SIGNATURE:

SD 3/31/2022

Signature and Date
Selena Ortega Area 7 @ Large Rep.

PRINT NAME and TITLE (if applicable)
Lincoln Heights Neighborhood Council

Name of Organization

Forward your completed Request for Facilities Use form as follows:

Scan and email to: facilities-use@lausd.net
OR

Mail or walk-in application to:
Los Angeles Unified School District
Permit Office
333 S Beaudry Avenue, 1st Floor
Los Angeles, CA 90017
Business Hours: 7:00am to 4:00pm

Should you have any questions, please contact:

Los Angeles Unified School District Permit Office

213-241-6785
213-241-6900

PLEASE BE ADVISED THAT COMPLETION OF THIS FORM AND/OR ACKNOWLEDGEMENT OF RECEIPT OF THIS REQUEST FOR FACILITIES USE DOES NOT CONSTITUTE APPROVAL OR PERMISSION TO MOVE FORWARD WITH YOUR USE.

After the initial review of this completed Request for Facilities Use form, your request will be forwarded to the Division of Risk Management or LAUSD Permit Office for further handling.
Additional documents and fees may be required by these offices prior to formal approval of your request.