

**FACILITIES CONTRACT**Waubonsee Community College

Campus Operations

#### **Sugar Grove Campus**

Route 47 at Waubonsee Drive Sugar Grove, Illinois 60554-9454 Telephone: (630) 466-7900 Fax: (630) 466-3594

## **Aurora Downtown Campus**

18 S. River Street Aurora, IL 60506-4134 Telephone: (630) 801-7900 Fax: (630) 906-4127

## **Aurora Fox Valley Campus**

2060 Ogden Avenue Aurora, Illinois 60504-7222 Telephone: (630) 585-7900 Fax: (630) 585-6344

Organization: Mid Val	ley Special Education Cooperative Contact: Marianne F	idishin Contact Email: Marianne.fidishin@	d303,org
Address: 1304 Ronzho	elmer Avenue St. St. Charles, Il 60174 E9950	799405 Tax Exempt #	
Date of Event:	3/15/18 12/21/2018 Day of Week: M, T, W and	TH Location Assigned: Classroom Weigel 122	
	• • • • • • • • • • • • • • • • • • • •	ated Attendance: 15	
***************************************			
Day Phone: 331-228-	4873 Evening Phone:		
Will there be an admis	ssion charge? Yes NoX	ale of any item? Yes NoX	
Nature of Function: S	S.A.I.L. Program (First Half of School Year)		
			1
	week)-\$15.00 per hour X 6 hours equals \$90.00 per day. X 69 days equals \$6,210.00.	Rental Fee:	\$6,210.00
		Janitorial Service Fee:	
	TOTAL HOURS:	Technical Fee:	
	HOURLY RATE: \$15.00 X 6 hrs/day	Event Staff Fee:	
	3/18 (Labor Day) and 11/19-11/23/18 (Thanksgiving on noted days are NOT included in total cost.	Other Fee Amount:	
	TOTAL: \$ 6,210.00	Total Due:	\$6,210.00
individually and on be its officers, board me herein provided.  I further certify that a	ereby certify that I am the appointed representative of the organisation, to indemnify, defend, and forever hold hambers, and employees, individually and collectively, as to any classical copy of the <i>General Procedures, Terms, and Conditions Go</i> if that agreement is made to abide by the terms and conditions the	armless Community College District 516 (Waubon him or claims which might arise out of the use of verning Use of Waubonsee Community Col	see Community College), If the college facilities as
Signature of Applicant	:		
Date:	Telephone Day:	Evening:	
Address:			
Approved by <b>Daniel</b> I	Larsen, Director of Campus Operations		
	Upon receipt of contract, ATTACH PAYMENT of: \$6,210.00		,
	Make check payable to <b>Waubonsee Community College Atte</b> Route 47 at Waubonsee Drive Sugar Grove, Illinols 60554-9454	ntion: Bursar Office	
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## WAUBONSEE COMMUNITY COLLEGE ACADEMIC CALENDAR 2018-2019

Fall Semester 2018	
First day of Fall registration	May 7, 2018
First day of classes Monday	August 20
Students withdrawn for nonpayment after this date must petition to re-enroll	
Labor Day break - Saturday through Monday	September 1-3
(Classes will not meet)	-
Weekend classes begin - Saturday	September 8
Mid-term - last day to change audit enrollment status	October 10
Spring semester registration begins at 8:00 am	
Thanksgiving break – Monday through Sunday(Classes will not meet)	
Last day to withdraw from 16-week fall semester classes	November 26
(See note below)	
Semester ends	December 15
Grades available to students - Wednesday	
chart on the website or credit schedule or contact Registration and Records for deta deadlines, refund dates, and withdrawal dates for weekend classes and other classes duration.	
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Spring Semester 2019 First day of Spring registration  First day of classes — Tuesday  Students withdrawn for nonpayment after this date must petition to re-enroli  Weekend classes begin — Saturday  Summer session registration begins at 8:00 a.m.  Mid-term — last day to change audit enrollment status  Spring break — Monday through Sunday  (Classes will not meet)  Last day to withdraw from 16-week spring semester classes  (See note below)  Fall semester registration begins at 8:00 a.m.	
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The above dates apply, in general, to traditional 16-week credit classes. Please refer to the Important Dates chart on the website or credit schedule or contact Registration and Records for details regarding registration deadlines, refund dates, and withdrawal dates for weekend classes and other classes shorter than 16 weeks in duration.



# **Event Application**

		Organizat	ion Inform	ation			
Name of Organization	n: Mid Valley Specia	l Education Coopera	ative	To	oday's Date: <u>5/11/1</u>	18	
Contact Name: N	Iarlanne Fidishin		Cor	ıtact Email: <u> </u>	Marianne.fidishin@	)d303.org	
Contact Phone:	331-228-4873			Tax Exempt? (yes/no)		Yes E9950-7994-05 mpt ID#:	
-					əx Exempt ID#:		
Address: 1304 Ro	nzhelmer Avenue St. (	Charles, IL 60174					
Maintenance and Au	dio Visual Needs:						
☐ Stage		Chairs		Mics/Star	nds 🗆	Projector Screens	
□ Tables		Other (list below)		Sound		Other (list below)	
VIII there be an	<del>,</del> .				<b></b>		
idmission charge?	Yes	X_No	Sale of an		, ☐Yes		
st. Attendees		15	Desired	l location:	Classroom (curre	ntly using Weigel 122)	
Event Start Date/Time	e: 8/1	5/18	Event End Da	ate/Time:	12/	21/2018	
escription of Event/	Meeting: S.A.I.L. Prog	ram (First Hair of Sci	noor rear)				
Additional Event/Mee	eting Requirements (d	lesired set-up and ar	ny additional i	Maintenanc	e or A/V needs):	5/17/10	
	Signature of A	uthorized Organization	Personnel			Date 1	
	Rev	iewed for Confli	ct of /Comp	eting Into	erests		
☐ Reviewed, determ	lned no conflict exist	s 🗆 W	/ill request fee	e walverch	eck box to indicate	yes .	
(provide sig	nature below)	(Please com	plete Fee Wal	ver Form lo	cated in File Cabine	t on PNYWCC) 2 4 2019	
(	Waubonsee Co	mmunity College Staff I	Evaluator		had-musamer.	Date	
		Approved					
	t-X	Approve.				MAY 2 4 2018	
For Office Use Only:	Dan Larsen	Director of Campus Op	erations			Date	
□Ad Astra Schedule	d		□Payment R	eceived			
☐IT Media Services	Confirmation		□Certificate	of Llability i	nsurance Received		
				<b></b>		F30.1(1.1)	
Сор	y: 🗆 Campus Oper	ations LICan	npus Police	⊔Me	dia Services	☐ Originator	