

# MVLA UHSD FACILITY USE SCHEDULE

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	
Date	<i>Please indicate start and end times in spaces.</i>			<i>Please indicate start and end times in spaces.</i>			<i>Please indicate start and end times in spaces.</i>						Date
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**Applicant organization:** \_\_\_\_\_ **Applicant signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

O/T Hrs:
Total Hrs: