

BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY

**SECRETARY ALEXIS PODESTA
SCHEDULING REQUEST**

Please complete and return this form to **Patti Ochoa** at Patricia.Ochoa@bcsh.ca.gov
Include attachments if necessary. Kindly allow up to two weeks for processing of this request.

Date received: _____

Scheduled Date _____ Time _____

Contact Name & Title		Organization	
Phone		Email	
Meeting Requestor (if different from contact)			
Meeting Purpose/Topic Event Description (please be specific)			
Meeting Participants			
Event Details (If requesting a meeting, list any preferred days/times)			
Event Name			
Date(s)/Time(s) Day of the week		Location/Address	
Additional Information			
Secretary's Role			
Expected attendance Outcome/Action			
Length of time to speak Time to Speaking Time for Q&A: Yes No			
Room set up (podium w/microphone or informal)			
Event Attire			
Background Information			
Additional Notes			

Internal Use Only

Comments	
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