

**OFFICE OF SPORTS FACILITIES
REQUEST FOR BLOCK SCHEDULE CHANGE
Aquatic Facilities**

Facility: Natatorium Pool - Lanes: _____ thru _____

Canyonview Pool - Lanes: _____ thru _____

Temporary change Summer Fall Winter Spring

Permanent change Summer Fall Winter Spring

Day/s: Sun. Mon. Tue. Wed. Thur. Fri. Sat

Times: From:_____:_____[] am [] pm To:_____:_____[] am [] pm

Academic Year: 20_____/_____

Reason for change:

BLOCK CURRENTLY HELD BY

Intercollegiate Athletics

Physical Education

Recreation IM Classes Masters Swim Open Lap Swim

Clubs Dive S.D Sunset Water Polo

Unblocked

Requestor: _____ **Date:** ____/____/____

Unit Director of Requestor: _____ **Date:** ____/____/____

Sign

.....
 Approved Denied _____ **Date:** ____/____/____

Unit Director, block time holder

Approved Denied _____ **Date:** ____/____/____

Sports Facilities Director

Cc: Unit Head - current block holder
 Unit Head - requesting