



OFFICE OF THE FACULTY COUNCIL

THE UNIVERSITY OF TEXAS AT AUSTIN

P. O. BOX 7816 • Austin, TX 78713-7816

(512) 471-5934 • Fax: (512) 471-5984 • <http://www.utexas.edu/faculty/council>

May 3, 2016

President Gregory L. Fenves
The University of Texas at Austin
MAI 400
Campus Mail Code: G3400

Dear President Fenves:

For your information, at its meeting yesterday, the Faculty Council endorsed the enclosed resolution from the Recruitment and Retention Committee (D 14531). The resolution was unanimously approved by voice vote.

Please let me know if you have questions or concerns regarding this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Hillary Hart".

Hillary Hart, Secretary
General Faculty and Faculty Council

HH:dlr

Enclosure

xc: Judith L. Langlois, interim provost
ec: Carol Longoria, assistant deputy to the president
Madeline Maxwell, chair, Recruitment and Retention Committee

SPECIAL EVENTS SUPPORT REQUEST

THE UNIVERSITY OF TEXAS AT AUSTIN, ITS TELECOMMUNICATIONS AND NETWORKING
Mail completed form to TN Audio Visual & Multimedia Services, SER 315, C3800 or Fax to (512) 471-7717

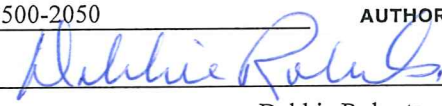
DEPARTMENT OFFICE OF THE GENERAL FACULTY DEPT REQ NO. _____ DATE 5/3/2016

REQUESTER NAME Debbie Roberts E-MAIL debbie.roberts@austin.utexas.edu PHONE 471-5934

CONTACT NAME Debbie Roberts MAIL CODE F9500 BLDG/ROOM WMB 2.102

CONTACT E-MAIL debbie.roberts@austin.utexas.edu PHONE 471-8506

ACCOUNT NUMBER (or Work Order No.) 20-5500-2050 AUTHORIZED SIGNER'S NAME _____

AUTHORIZED SIGNATURE  _____

Return department confirmation copy to: NAME Debbie Roberts MAIL CODE F9500

1. You **must reserve the space** through the department or organization that manages the space or through Official Publications, (512) 475-7600. Reserve the space **at least one hour before the event starts and at least 30 minutes after the scheduled end** for set up and strike.
2. Please use this form for Blanket Order requests as well.
3. **Need help filling this out?** Call (512) 471-9238 or visit the Web site at www.utexas.edu/its/av/.

EVENT INFORMATION

NAME OF EVENT: 2016-17 Faculty Council Meetings

LOCATION OF EVENT Please include the building, room and any other information necessary for us to find the site(s): All meetings will be held in Main 212.

SPECIAL INSTRUCTIONS (Attach diagrams, drawings and extra pages as necessary): .Please provide audio set up (Digital audio recording) and arrange room for Faculty Council meetings in 2016-17. Note that the annual meeting of the School of Undergraduate Studies will be held immediately preceding the annual meeting of the General Faculty. These two meetings will be held on Monday, October 10, 2016, in Main 212 beginning at 1:30 p.m. The Faculty Council meeting will immediately follow the General Faculty meeting.

EVENT TIME(S) AND DATE(S)

Include all occurrences (attach extra pages if necessary)

Event Date(s)	Event Start Time(s)	Event End Time(s)
Monday, September 19, 2015	2:15 p.m.	4:15 p.m.
Monday, October 10, 2015	1:30 p.m.	5:00 p.m.
Monday, November 14, 2015	2:15 p.m.	4:15 p.m.
Monday, December 5, 2015	2:15 p.m.	4:15 p.m.
Monday, January 23, 2016	2:15 p.m.	4:15 p.m.
Monday, February 20 2016	2:15 p.m.	4:15 p.m.
Monday, March 6, 2016	2:15 p.m.	4:15 p.m.
Monday, April 10, 2016	2:15 p.m.	4:15 p.m.
Monday, May 1, 2016	2:15 p.m.	4:15 p.m.

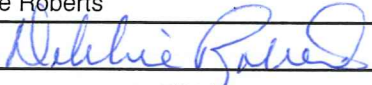
IF NECESSARY, ATTACH EXTRA PAGE(S).

Physical Plant Use Only

WORK REQUEST FORM
The University of Texas at Austin
Physical Plant - Campus Mail H7015
FAX 471-8788

Work Order Number

Part 1 - REQUEST (COMPLETED BY REQUESTOR)

TO: Physical Plant, Planning & Scheduling, PP1		Dept. Request No.	
From: Name	<u>Debbie Roberts</u>	Account No.	<u>20-5500-2050</u>
Title	<u>Executive Assistant</u>	Location of Work:	
Phone	<u>512-471-8506</u>	Building	<u>Main</u> Room <u>212</u>
Dept.	<u>General Faculty Ofc</u> College _____	Other _____	
Request for: _____ Estimate _____ Change Order _____		Special Requirements <u>Audio setup and recording of</u>	
<input checked="" type="checkbox"/> Performance _____ Other _____		<u>meeting; move tables from room.</u>	
Description of Work: <u>Audio recording and room set up for the 16-17 Faculty Council meetings in Main 212 referenced in the attached memo.</u>			
Please call if you have questions or concerns. THANK YOU!!! Set up at 1:00 pm; reset unnecessary.			
Name of Contact <u>Debbie Roberts</u>		Phone <u>512-471-8506</u>	
Requestor's Signature 		Campus Address <u>WMB 2.102</u>	
(must have signature authority) Date <u>5/03/2016</u>		Attachments _____	
(must have Dean's signature for all remodeling projects)			

PART II - ESTIMATE (COMPLETED BY PHYSICAL PLANT)

TO:	
Estimate	Remarks _____
Labor _____	_____
Material _____	_____
Contract _____	Enclosures _____
Contingency _____	Signature _____
Total _____	Date _____

PART III - AUTHORIZATION (COMPLETED BY REQUESTOR)

To: Physical Plant Planning & Construction	
Authorization to proceed _____	
Requestor's/Dean's Signature _____	Date _____

(Physical Plant Use Only)	A&E _____	Date _____
Disposition: 1. Work Order Assigned To: _____	Utilities _____	Date _____
2. Cancelled. Date _____	Maintenance _____	Date _____
3. Closed. Date _____	Other _____	Date _____