



**THE GEORGE  
WASHINGTON  
UNIVERSITY**  
WASHINGTON, DC

## Hotel and Conferencing Requirements Document

*(Save and Open this document in Adobe Acrobat before filling it out to avoid loss of data)*

<b>Requestor/Dept. &amp; Contact Name</b>	<b>Telephone:</b>	<b>Email:</b>
<b>Project Sponsored by:</b> Federal Award                      Non-Federal Award		

<b>Name of Event</b>	
<b>Conference Location (City and State)</b>	
<b>Conference Dates</b>	
<b>Project Task Award (PTA) Number</b>	
<b>GWU Event Coordinator at Meeting (include telephone and email)</b>	
<b>Is a Site Visit Required by the Principal Investigator?</b>	Yes or                      No
<b>If yes, Does the Award Provide Funding for a Site Visit</b>	Yes or                      No

**Hotel/Conference Requirements:**

<b>Hotel Location</b>	Hotel to be within _____ blocks _____ miles of:  GWU  Sponsor  Airport  Public Transportation  Other Specify ____							
<b>Total Number of Federal Employees Attending This Event</b>								
<b>Hotel Rooms</b>	GW will _____ or will not _____ be responsible for _____ hotel rooms.							
<b>Room Accommodations</b>								
<b>Sleeping Rooms?</b>	Single _____ Double _____ Not Needed _____							
<b>Number of Sleeping Rooms (by day)</b>		<b>Mon.</b>	<b>Tues.</b>	<b>Wed.</b>	<b>Thurs.</b>	<b>Fri.</b>	<b>Sat.</b>	<b>Sun.</b>
	<b>Date</b>							
	<b>Rooms</b>							

**Meeting/Conference/Event**

<b>Conference Room Requirements</b>	# of Days: _____ # of Attendees: _____ Dates from _____ to _____ Time: _____ a.m. - _____ p.m.
<b>Type of Seating</b>	Theater _____ Rounds _____ Classroom _____  Other Specify: _____
<b>Breakout Rooms</b>	# of Days: _____ # of Breakout Rooms: _____ # of Attendees in Each Breakout Room: _____
<b>Arrangement: Breakout Rooms</b>	Crescent Rounds _____ Rounds for 8-10 _____ Other Specify: _____

**Catering and Food Service**

<p><b>Budgeted Dollar Amount for Food and Beverage</b></p>	
<p><b>Reception</b></p>	<p>Date: _____ Time: _____          # of Attendees: _____          Special Requests/Set-Up: _____          No Reception Necessary</p>
<p><b>Breakfast</b></p>	<p># of Days: _____ # of Attendees: _____          Dates from _____ to _____          Time: _____          Type: Continental Buffet Seated          No Breakfast Necessary</p>
<p><b>Lunch</b></p>	<p># of Days: _____ # of Attendees: _____          Dates from _____ to _____          Time: _____          Type: Continental Buffet Seated          No Lunch Necessary</p>
<p><b>Dinner</b></p>	<p># of Days: _____ # of Attendees: _____          Dates from _____ to _____          Time: _____          Type: Continental Buffet Seated          No Dinner Necessary</p>
<p><b>AM/PM Breaks</b></p>	<p># of Days: _____ # of Attendees: _____          Dates from _____ to _____          Time(s): _____          Coffee/Tea Soft Drinks Snacks          Other Specify: _____</p>
<p><b>Other Catering Support Requirements (e.g., Dietary Restrictions or Special Requests)</b></p>	

**A/V and Miscellaneous:**

<b>Budgeted Dollar Amount for A/V Costs</b>	
<b>Dates Required</b>	
<b>Description and Quantity of Equipment/Services Required</b>	
<b>All Other Requirements or Special Instructions (e.g., Contingencies, Internet Access, Eco- Friendly Concerns, Conference Location May/May Not Be a Resort, etc.)</b>	

<b><u>Requested Concessions – if any</u></b>	
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**Additional Information**

<b>Evaluating Criteria (Factors to be evaluated) – contact Procurement for assistance</b>	
<b>Evaluating Committee (list in odd numbers – minimum 3, people to evaluate bids/proposals/quotes received)</b>	
<b>Independent cost estimate (ICE) – only on Federal funds expected to exceed \$150k</b>	

**Suggested Hotel(s)**

Provide hotel(s) to be considered in the RFP process, if any, and rationale for including the hotel(s)

<b>Hotel:</b>	<b>Rationale:</b>

<b>Decision Date</b>	
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Visit [Procurement Manual](#) for more details on RFP/Bid process or contact Procurement