

MEETING SETUP CHECKLIST

Facilities:

- Room reserved
- Table and chairs arranged
- Appearance professional

Attendees:

- Invited to attend
- Informed of time and place
- Attendance acknowledged

Equipment/Materials:

- | | |
|--------------------------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Audiovisual equipment tested and in place | <input type="checkbox"/> Masking tape |
| <input type="checkbox"/> Chart paper/easel | <input type="checkbox"/> Handouts |
| <input type="checkbox"/> Film/Cassette | <input type="checkbox"/> Agenda |
| <input type="checkbox"/> Pens (markers and others) and Paper | <input type="checkbox"/> Supporting documents |
| <input type="checkbox"/> Nametags | |

Household:

- | | |
|---------------------------------------------------------|-----------------------------------------------------------------------|
| <input type="checkbox"/> Coffeepot | <input type="checkbox"/> Key to room |
| <input type="checkbox"/> Instant coffee, tea, chocolate | <input type="checkbox"/> Lights (location, use, switches) |
| <input type="checkbox"/> Sugar and cream | <input type="checkbox"/> PA system (use, controls) |
| <input type="checkbox"/> Spoons and stirrers | <input type="checkbox"/> Restrooms (location, handicapped facilities) |
| <input type="checkbox"/> Cups | <input type="checkbox"/> Temperature (heat and/or A.C. controls) |
| <input type="checkbox"/> Food | |
| <input type="checkbox"/> Napkins or paper towels | |
| <input type="checkbox"/> Wastebasket | |