**SOLICITUD DE MATERIAL DOCENTE EN EL PABELLÓN GALA / PABELLÓN POLIDEPORTIVO / PISTAS EXTERIORES. (rellenar solo cuadros con fondo amarillo)**

|  |  |
| --- | --- |
| **PROFESOR / MONITOR** |  |

|  |  |
| --- | --- |
| **E-MAIL** | **TELÉFONO** |
|  |  |

|  |  |
| --- | --- |
| **ASIGNATURA / ACTIVIDAD** | **INSTALACIÓN/SALA** |
|  |  |

|  |  |  |
| --- | --- | --- |
| **FECHA USO** | **HORA INICIO** | **HORA FINALIZACIÓN** |
|  |  |  |

|  |  |
| --- | --- |
| **OPERARIO ENTREGA MATERIAL** | **OPERARIO RECOGE MATERIAL** |
|  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **CANTIDAD** | **MATERIAL** | **UBICACIÓN INICIAL** | **DEVUELTO** |
| 1 |  |  |  | Si / No |
| 2 |  |  |  | Si / No |
| 3 |  |  |  | Si / No |
| 4 |  |  |  | Si / No |
| 5 |  |  |  | Si / No |
| 6 |  |  |  | Si / No |
| 7 |  |  |  | Si / No |
| 8 |  |  |  | Si / No |
| 9 |  |  |  | Si / No |
| 10 |  |  |  | Si / No |
| 11 |  |  |  | Si / No |
| 12 |  |  |  | Si / No |
| 13 |  |  |  | Si / No |
| 14 |  |  |  | Si / No |
| 15 |  |  |  | Si / No |
| 16 |  |  |  | Si / No |
| 17 |  |  |  | Si / No |
| 18 |  |  |  | Si / No |
| 19 |  |  |  | Si / No |
| 20 |  |  |  | Si / No |
| 21 |  |  |  | Si / No |
| 22 |  |  |  | Si / No |
| 23 |  |  |  | Si / No |
| 24 |  |  |  | Si / No |
| 25 |  |  |  | Si / No |

|  |
| --- |
| **OBSERVACIONES** |
| Durante la clase solicita el uso de los tres muñecos de lucha. |

Enviar archivo adjunto a: **pabellon.gala@uah.es**