



**Expeditionary Warfare Training Group Pacific**  
 3423 Guadalcanal Road, Building 401, Room 108  
 Coronado, California 92155-5099  
 (619) 437-3222

**EWTGPAC Classroom/Conference Room Reservation Agreement**

Unit Name: \_\_\_\_\_

Unit Address: \_\_\_\_\_

POC: \_\_\_\_\_ POC E-Mail: \_\_\_\_\_  
 Rank/Rating Last Name, First Name M.I.

Alt. POC: \_\_\_\_\_ Alt. POC E-Mail: \_\_\_\_\_  
 Rank/Rating Last Name, First and M.I.

Phone# : (\_\_\_\_) - \_\_\_\_\_ Cell Phone# : (\_\_\_\_) - \_\_\_\_\_  
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**Reservation Information:**

Event Name: \_\_\_\_\_  
 Please list all O-6/GS-15 and above Name/Rank/Title (attach separate roster if required).

**\*For flag or SES attendees, provide biographies as well as any requirement for reserved parking spaces.**

Starting Day: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Ending Day: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Daily Start/End Time: \_\_\_\_ : \_\_\_\_ : \_\_\_\_

Audio/Visual Required:  No  Yes (Check one)

# of Attendees Expected: \_\_\_\_\_ # of Military: \_\_\_\_\_ # of Civilian: \_\_\_\_\_

Number of Classrooms Desired: \_\_\_\_\_ (CR Name/#/s: \_\_\_\_\_)

Special request (SVTC/SIPR?): \_\_\_\_\_

**Classification of Event:**                      **Unclassified**                       **Secret**   
 (Check or Circle one)

**Classified Information**

When requesting a classroom for a classified event, this agreement must be digitally signed, scanned and emailed to (ewtgpac\_N6.fct@navy.mil). **The POC is responsible for ensuring that protocols and procedures regarding marking, protection, transmission and/or transportation of all classified materials are followed in accordance with DoD Information Security Program Manual (DODM 5200.01) and DON Information Security Program (SECNAVINST 5510.36B).** All personnel clearances must be verified by the EWTGPAC Assistant Security Manager (ASM). All personnel attending the classified event must submit a visit request via DISS no later than **two weeks** prior to the event. Submit to **SMO Code: N630186**, and ensure all personnel annotate the same title of the event in the POC block and the specific dates (not including travel) are notated correctly. For questions about visit request or visitor badges, contact the ASM: **SSgt Anthony Lebron. EWTGPAC\_Security.fct@navy.mil (619)437-1998. Requests for classified events will not be processed until clearances have been verified by the ASM.**

**Secure video teleconferencing (SVTC)** is available for attendees of training while at EWTGPAC. It is the responsibility of the attending units to provide the SVTC Cut Sheet with contact information for commands attending the conference via SVTC to JEWL personnel. JEWL personnel will assist by providing JEWL SVTC dial-in information to facilitate a SVTC bridge request. All SVTC's with outside networks (i.e. the Marine Corps (MCEN) network) will require a bridge. JEWL personnel will be available to operate the SVTC equipment and dial in using the provided bridge information. Please contact the JEWL OPS Lead: **OSC Zuniga or IT1 Tablan** for SVTC and audio/Visual requests **EWTGPAC\_N6.fct@navy.mil (619) 437-2765/5031.**

**\*SIPR access is provided through NCTE. Please contact OSC Zuniga, or IT1 Tablan for SAAR form and instructions for network access.**

**In the event of an emergency, contact the Command Duty Officer (CDO): 619-726-0861.**

**Reservation Criteria:** POC acknowledge by initialing after each paragraph

1. I acknowledge that **EWTGPAC personnel have priority of all classrooms**. If this reservation requires interruption, rescheduling or cancellation, EWTGPAC will accommodate in the best way possible.

➤ **Initial:** \_\_\_\_\_

2. I acknowledge responsibility for supervision, safety, security, and clean-up of reserved facility and adjacent areas. Reserved facilities and their adjacent areas will be left clean and professional. **Trash receptacles will be emptied at the conclusion of each day.** Check out with POC on last day of event **619-437-3222**.

➤ **Initial:** \_\_\_\_\_

3. I will inform EWTGPAC of any discrepancies (equipment failure, cleanliness, etc.) with the facility so that the issues may be noted or addressed. Attendees will **NOT** remove, reposition, reconfigure, disconnect, or modify the state of any of the equipment/furniture in any area without the **PRIOR** consent of EWTGPAC. Limited technical support is available upon request.

➤ **Initial:** \_\_\_\_\_

4. Drinking in the classrooms is permitted with covered containers only. Eating in the classrooms is only permitted with prior approval from EWTGPAC. Consumption of alcohol and smoking is **PROHIBITED** in all buildings and classrooms. There are designated smoking areas for each building.

➤ **Initial:** \_\_\_\_\_

5. Attendees will keep traffic ways clear and minimize noise levels, as there are personnel working and/or other classes in session. POC or their appointed representative will ensure timely arrival to open and take charge of their assigned facility. If access prior to 0800 is necessary, the POC will contact the CDO. **At no time may attendees visit any unassigned classroom, break/conference room or another facility without prior permission.**

➤ **Initial:** \_\_\_\_\_

6. EWTGPAC is not responsible for any items left unattended at any time. **DO NOT** leave any valuables, equipment, etc., unattended.

➤ **Initial:** \_\_\_\_\_

7. Notify EWTGPAC OPS and JEWL OPS Lead (OSC Zuniga/IT1 Tablan) of cancellations or change of dates will be accommodated, depending on availability. New reservation forms may be required.

➤ **Initial:** \_\_\_\_\_

8. A signed copy of this form is to remain with the POC until the completion of the reservation. The POC agrees to brief all attendees on or before the first day of the reservation, on these rules and ensure compliance throughout the event. The POC agrees to brief all attendees on emergency evacuation plan, in the event of fire or disorder, prior to the start of the event. If not present on station, the POC will designate a representative to comply with this agreement.

➤ **Initial:** \_\_\_\_\_

**I CERTIFY AND AGREE TO ABIDE BY THE CONDITIONS STATED ABOVE AND UNDERSTAND THAT FAILURE TO DO SO MAY RESULT IN MY UNIT'S IMMEDIATE AND FUTURE LOSS OF THE USE OF THESE RESOURCES.**

**Sign and email to [ewtgpac\\_ops@navy.mil](mailto:ewtgpac_ops@navy.mil) (Unclassified) or [EWTGPAC\\_N6.fct@navy.mil](mailto:EWTGPAC_N6.fct@navy.mil) (Classified)**

Point of Contact Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Scheduling Official Signature: \_\_\_\_\_ Date: \_\_\_\_\_