Annex II

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| **Room reservation form for intergovernmental consultations**  **and events organised by specialized agencies, NHRIs, and special procedures mandate-holders**   * **Room reservations have to be submitted no later than 12 p.m. on the day prior to the scheduled meeting. Requests made after 12 p.m. on the day prior to the meeting will not be reflected in the Bulletin of Informal Meetings.** * **Reservations requests are not processed if form is not duly filled. No meeting room may be occupied without prior authorization of the Secretariat.**   **1. ORGANIZER:** |
| **Delegation(s) responsible for the meeting**:   |  | | --- | | A…………………………………………….. B. ………………………………………………. |   **\* If meeting organized on behalf of a Regional Group, please indicate:** …………………………………………..  **Contact person: Contact details:**   |  |  | | --- | --- | |  | **Mobile:** ……………………………………….  **Email:** ……………………………………………. |  1. **TITLE OF MEETING:**   **Date of meeting:** ……………………  **Time of meeting**: ………………………..  A**. Consultations on draft proposal:**   **Open-ended** **informal consultations on the draft (public meeting)**  *[Please insert title of draft resolution/decision/presidential statement]*   |  | | --- | |  |    **Meeting of co-sponsors of the draft (closed/private meeting)**  *[Please insert title of draft resolution/decision/presidential statement]*   |  | | --- | |  |   B**. Other type of meeting:** *Please indicate subject*   |  | | --- | |  |   **3. OTHER INFORMATION:**  **Number of participants**:………………  **Meeting to be** **announced on the Bulletin of Informal Meetings**:  Yes  No  **Meeting to be displayed on the general display board**:  Yes  No  **Equipment of the room:**   Country name plates  Access to interpretation booths  Video projector via PC (CD, DVD, PowerPoint) |
| **Date of request: ………………………**  **Signature:………………………………..** |
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**FOR SECRETARIAT USE ONLY**

**Confirmation:**

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| * **YES:** Date: \_\_\_\_\_\_ Time: \_\_\_\_\_ Room: \_\_\_\_\_ |  **NO:** Reason: |