

Planetarium Response Sheet

Building:Contact Person:		_ District:	
		Phone:	Phone:
Building Ad	dress:		
Directions (attach map):		
Location for	r the Planetarium:	o ot looot 25' v 25' with	ceiling clearance of at least 12')**
	(Room must be	e at least 25 x 25 with	ceiling clearance of at least 12)
SCHEDULE	D DATES:[Mon-Tues-Wed-Thur-Fri]	Grade Levels V	isiting:
enclosed. F	elections: The Planetarium Program for each grade level, please and one such in include up to two programs, or one	selection below or w	rite in a specific topic to be covered
Kindergarten	n: \square Night and Day	Grades 6-12:	☐ A Change of Seasons☐ Now You See It
Grades 1-3:	 □ Night and Day □ Going Through a Phase □ Location, Location □ Greek Myths in the Sky 		 Welcome to the Neighborhood- Overview Welcome to the Neighborhood- The Planets Star Light, Star Bright
Grades 4-5:	 □ Night and Day □ Going Through a Phase □ Greek Myths in the Sky □ Welcome to the Neighborhood-The 	Planets	☐ A Calendar in the Stars☐ Big Macs
HS ☐ T\	osing the Dark (6:25) All Grades wo Small Pieces of Glass (22:45) 4th-HS ack to the Moon for Good (24:40) 6th-HS	☐ From Earth to t	Edge of the Solar System (28:34) 4th- he Universe (31:00) 5th-HS efending the Earth, Defining the Cosmos
Building Prin	cipal:	_	
Signature of Building Principal:			Date:

**Please note: At least 12 feet of clearance is required for the new planetarium setup. If the top of the planetarium is against the ceiling, ventilation, etc. we will not be able to hold the presentations in that space.

*Scheduling REMINDER: Please allow 40-45 minutes for each class and approximately 10 minutes between classes. Maximum 25 students per class/6 classes per day. Please also schedule a 30 minute lunch break for the instructor. We will need approx. 1 hour to set up before the first class.

Date:	(up to 6 sessions + 30-minu	(up to 6 sessions + 30-minute lunch break for instructor)	
Start – End Time	Grade Level	Teacher's Name	
		C.A.V	

Date:	(up to 6 sessions + 30-minute lunch break for instructor)		
Start – End Time	Grade Level	Teacher's Name	
		0	

Return this form (via interoffice mail, U.S. Mail, fax, or e-mail) at your earliest convenience to:

Cindy Zajac, Secretary
OCM BOCES Science Center
PO Box 4754
Syracuse, NY 13221

Phone: 315-433-2671 Fax: 315-433-2203 czajac@ocmboces.org now total name dates are confirmed will be sent once takes are confirmed once takes are confirme