

ALCOHOL SERVICE APPROVAL FORM

In accordance with University Policy #81, Alcoholic Beverages, this form must be completed, approved (within 14 calendar days prior to the event), and submitted to Aramark before alcohol can be served at a University event.

Note: Please ensure that the proposed event details conform to the general considerations and locations outlined in Policy #81, Sections V.C.1 and V.C.2 prior to submission.

EVENT DETAILS (Details must align with catering order, when applicable)

EVENT NAME/PURPOSE: _____

EVENT SPONSORS/ORGANIZERS: _____

PHONE NUMBER FOR EVENT SPONSOR: _____

REQUESTED LOCATION: _____

DATE OF EVENT: _____

BEGINNING/END TIMES*: _____

*Total duration not to exceed 2 hours for events with full meals or 1½ hours for events with receptions.

APPROVALS

NAME (Printed) OF EXECUTIVE COUNCIL MEMBER**: _____

EXECUTIVE COUNCIL MEMBER SIGNATURE/DATE: _____

**If event sponsor is an Executive Council member, the event extends beyond the 2 hour limit, or requested location is a University facility not listed in Policy #81, Section V.C.2., signature of the Chancellor is required.

CHANCELLOR SIGNATURE/DATE: _____