



# Food/Alcohol/Refreshment Request

(Complete & send to Office of Housing & Residence Life, Suites on Maple –West, Suite G-37, at least one week in advance of event)

Date \_\_\_\_\_

Bill To: **UNIVERSITY**

**OR** **OTHER (Including Cash)**

Department: \_\_\_\_\_

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

Department Address: \_\_\_\_\_

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

Coordinator: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

\_\_\_\_\_

SAP Cost Code \_\_\_\_\_

Telephone: \_\_\_\_\_

Authorization requested for:	Meal Tickets _____	Catered Event _____
Number to be served:	Breakfast _____	Lunch _____
	Dinner _____	Refreshments _____
Contact person: _____	Telephone: _____	
Date of event: _____	Time of event: _____	Location: _____

Purpose or Reason for Event: \_\_\_\_\_

University Authorized Signature – Please print

Responsible Person for other funding – Please print

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Signature)

Complete only when alcoholic beverages will be served:	Funding Source: _____
(Note: University funds <b>may NOT</b> be used to purchase alcohol)	Approval: _____ Divisional Vice President or President

If alcohol is being requested, on a separate sheet indicate how you plan to control access to alcohol for persons attending the event who are under the legal drinking age.

**NOTE: Formal arrangements must be made with Campus Dining at x5709 or x4580**