REQUEST FOR PERMISSION TO SERVE ALCOHOLIC BEVERAGES

(1). EVENT SPONSOR:

(2). INDIVIDUAL MAKING REQUEST:

(Name) (Phone) (Email)

(3). EVENT SPONSOR CONTACT:

(Name) (Phone) (Email)

(4). DATE OF EVENT:

(5). EVENT TIMES:

(6). NAME OF EVENT: President’s Pre-Game Rally

(7). DESCRIPTION OF EVENT:

Party_____Sporting_____Banquet_____

• Other (Please Describe)

(8). ESTIMATED ATTENDANCE:

(9). Students Expected to Attend: Yes ___/No_____

(10). LOCATION OF EVENT: Bragg Stadium (President’s Box)_____/Alumni House

Faculty Clubhouse ____/Lawson Center ____/Viticulture ________

Grand Ballroom____Other: / (Approved by BOT____/____/____)

(11). OFF CAMPUS VENUE:________________________________________

Address Name of Venue

(12). DESCRIBE VENUE (if not indoors):

(13). TYPE OF ALCOHOLIC BEVERAGES: Beer _____/Wine _____/Distilled Spirits _____

(14). ARE BEVERAGES TO BE SOLD: Yes_____/No_____

(15). NAME OF CORKAGE FIRM:

License _____/Insurance _____/Permit (for sales only)

I hereby certify that I will abide by the alcoholic beverage laws of the State of Florida and Florida A&M University Policy 3.021

__________________________________________  ___________________________
Event Sponsor Date

Vice President for Student Affairs
(Only if item 9 is “yes”)

__________________________________________  ___________________________
Date:________________________  Date:________________________

Dean of Students
(Only if item 9 is “yes”)

__________________________________________  ___________________________
Date:________________________  Date:________________________

Department of Public Safety
Has received notice

__________________________________________  ___________________________
Date:________________________  Date:________________________

Risk Management has received License, Insurance and Permit

__________________________________________  ___________________________
Date:________________________

Office of General Counsel

__________________________________________  ___________________________
Date:________________________

Event Approved_____/Not Approved_____

__________________________________________  ___________________________
Dr. Elmira Mangum, President
Date

*If students are served alcoholic beverages, they should present ID.

Revised 06/2014