

NOTICE OF EVENT AT WHICH ALCOHOLIC BEVERAGES WILL BE SERVED

- Please read policy statement on reverse side.
- Obtain approval of Sponsoring University Department/Unit.
- Obtain approval of person in charge of Facility.
- Return completed form to Special Events Coordinator, U.C.P.D., at least seven days before event.

Person filling out form: _____ Phone # ____
 Organization: _____ UC Affiliate? Fac. / Staff / Std. / No

Nature of Event: _____ Date of Event: _____

Location Of Event: _____ Time of Event: _____

Attendance: Faculty ___ Staff ___ Students ___ Guests ___ TOTAL: _____

Security provided? _YES _NO If yes, who? _____

Is there any fee whatsoever for this event? ___ YES ___ NO: If yes, is this event being catered? ___ YES ___ NO: Who? _____

Does Caterer/person have alcohol license? _YES _NO: License # _____

Source of funds for obtaining alcoholic beverages? _____ Will food be served? ___ YES ___ NO, Non-alcoholic beverages? ___ YES ___ NO

Name of Faculty or Staff Person who will be present at event to ensure that no one under 21 years is served alcoholic beverages: _____

Name	Position	Address	Telephone
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SPONSOR APPROVAL

FACILITY APPROVAL

Sponsoring Department or Unit

Person Authorizing Facility Use

Department or Unit Chairperson

Campus Address Telephone

Campus Address Telephone

Signature Date

Signature Date

UNIVERSITY OF CALIFORNIA POLICE DEPARTMENT

APPROVED: ___ YES ___ NO, IF no, reason: _____

Signature Position Date

**RETURN COMPLETED FORM TO : SPECIAL EVENTS COORDINATOR
UCPD, 1 SPROUL HALL**