Please contact the Office of Student Engagement for contract and/or insurance requirements. This form must be submitted within 15 working days Received on: prior to the date of the meeting or event. Any revisions, changes, or cancellations require written notideast 5 days prior to the request. Submit all funding and Meeting or Event Request Forms to the Office of Student Engagement. Contact Information	
Contact Name: Phone:	Email:
Name of StudenClub/Organization:	
Meeting or Event Information	
Name of Meeting/Event:	Date of Event:
Type of Meeting/Event: Location Requested	
Time of Event (list duration of event, including st	tart time and end time):
Time needed for access for set up prior to event	:: Expected Attendance:
Event Held on Campus? YES N@ vent is off campus, then submit Liability Forms to the Office of Student Engagement PRIOR to event.)	
Event Open to Public? YES NOWill donations be solicited? YES NO	
Will admission fees, contributions, or membership dues be collected? YES NO Amount Charged? \$	
Please explain how proceeds will be used:	
Are you requesting funding from ASO? YES NO If yes, the Budget Request Form must accompany Facility Request.	
Are you requesting ofcampus services (speakers, vendors, etc.)? YES NO If yes, contracts must be prior approved.	
Please list all vendors and/or invited speakers:	
Are you planning to serve food? YES Moes, please attach current food handler's license of the food service.	
The Event/Meeting Facility Form will not be approved until the vendor contract and/or food handler's license is received.	
Are you requesting parking permits? YES NO If yes, please note quantity:	
WAIVER OF CUSTODIAL COSTS: Permittee agrees to return facilities to original state to qualify for a waiver of custodial fees. Failure to restore all facilities to their original state will require payment.	
Faculty/Staff Advisor Approval (includes being present at event/meeting)	
Advisor Name: Department: MAINTENANCE & OPERATIONS:	