

STATE UNIVERSITY OF NEW YORK  
COLLEGE AT CORTLAND  
\*ALCOHOL USE REQUEST

- **NOTE: THIS FORM IS FOR INCLUSION OF ALCOHOL AT COLLEGE-SPONSORED EVENTS AND DOES NOT CONSTITUTE FACILITIES APPROVAL OR CONFIRMED CATERING ARRANGEMENTS**

TITLE OF EVENT: \_\_\_\_\_

REQUESTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

DATE OF EVENT: \_\_\_\_\_ TIME OF EVENT: from \_\_\_\_\_ to \_\_\_\_\_

LOCATION: \_\_\_\_\_ (REQUESTOR MUST FILL OUT FACILITIES USE REQUEST FORM SEPARATELY TO CAMPUS)

IS THIS AN ASC CATERED EVENT? \_\_\_\_\_ YES \_\_\_\_\_ NO

PERSON RESPONSIBLE DURING THE EVENT WHO WILL ENSURE COMPLIANCE WITH THE COLLEGE'S ALCOHOL POLICY (SEE COLLEGE HADNBOOK, CHAPTER 360):

(NAME (PLEASE PRINT) \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DEPARTMENT/ORGANIZATION

NUMBER OF PEOPLE EXPECTED TO ATTEND \_\_\_\_\_

TYPE OF ALCOHOL TO BE SERVED \_\_\_\_\_

COUNT OF ALCOHOL \_\_\_\_\_

WILL NON-ALCOHOLIC BEVERAGES BE AVAILABLE? \_\_\_\_\_ YES \_\_\_\_\_ NO

WILL PERSONS UNDER THE AGE OF 21 BE PRESENT? \_\_\_\_\_ YES \_\_\_\_\_ NO

NUMBER OF UNDERAGE PARTICIPANTS \_\_\_\_\_

IF UNDERAGE PERSON WILL BE PRESENT, PLEASE EXPLAIN YOUR MEANS OF DETERMINING WHO CAN LEGALLY BE SERVED ALCOHOLIC BEVERAGE AND WHO CANNOT (CARDING OR PROOFING SYSTEM)

\_\_\_\_\_

WHO WILL CLEAN UP UPON COMPLETION OR EVENT \_\_\_\_\_

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ALCOHOL ADVISORY COMMITTEE USE

APPROVED

REGISTERED

REJECTED

COMMENTS: \_\_\_\_\_

*PLEASE RETURN THESE FORM AT LEAST FOURTEEN (14) WORKING DAYS PRIOR TO THE EVENT TO: OFFICE OF THE VICE PRESIDENT FOR STUDENT AFFAIRS, 407A COREY UNION.*

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V.P. SIGNATURE FOR  
Alcohol Advisory Committee

Copies will be distributed to:

Requestor, Person Responsible, Building Administrator, Corey Catering, Scheduling Office (Corey Union)