## California State University Northridge

## **Request for Use of Alcohol Form**

**I. POLICY:** The use of alcohol in facilities and at events under the supervision of the University Corporation is permitted pursuant to the University policy on the Use of Alcohol and Illicit Drugs (<u>http://www-admn.csun.edu/vp/policies/900\_oversight/900-06-policy.pdf</u>). All other use of alcohol in University facilities or off-campus at University sponsored events is prohibited unless approved by the appropriate Vice President (or designee), the President's Chief of Staff, or the Executive Director (or designee) of the University Corporation, who shall consider requests from off-campus groups.

**II. PROCEDURE:** Review the University Policy on the Use of Alcohol and Illicit Drugs prior to initiating this request. The Request for Use of Alcohol form must be submitted to the appropriate approving officer(s) no later than 10 working days prior to the event. A copy of the approved Request form must be sent to the <u>Director of Police Services</u> and the <u>University Risk Manager</u> prior to the date of the event, and must be kept on the premises during the event. Instructions for completion of this form are provided on back.

## **III. EVENT INFORMATION:**

Event Sponsor:		Da	ay Phone:	Event Date:	
Event Representative:		Ce	ll Phone:	Email:	
Event Title:		Ev	ent Purpose:		
Location:				Expected Number of Attendees:	
Including, Students	Faculty	Staff			
Name of entity to which an ABC Licer (Please attach a copy of this license) IV. ALCOHOL TO BE SERVED:	nse has been issue	ed for this event, if requ	iired:		
What alcoholic beverages are you red	questing to serve?	?			
Alcoholic beverages will be provided:	No Cost	For Sale			
Will alcoholic beverages be served by	individuals with f	formal training concern	ing the responsit	le service of alcohol? (e.g. TIPS Program)?	
YES NO					
If not, explain the measures that will	be taken to insure	e that alcohol is consum	ned only in accore	lance with University policy:	
V. CERTIFICATION:					
I hereby certify that I have read the L admn.csun.edu/vp/policies/900 ove responsible for insuring its compliance	rsight/900-06-pol	icy.pdf). I further certif		://www- attendance at the above event and will be	
Signature of Responsible Event Repr	esentative:			Date:	
VI. APPROVALS:					
Dean or Director:				Date:	
VP/Chief of Staff:				Date:	
Executive Director, TUC:				Date:	