



## Student Activities Office On/Off Campus Activities Approval Form

Name of Organization: \_\_\_\_\_

Activity: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ - \_\_\_\_\_

Purpose of Activity:

\_\_\_\_\_

\_\_\_\_\_

Location: \_\_\_\_\_ Admission/Cost to Participate \_\_\_\_\_

Is this event open to the University public?  Yes  No

Will this event be published in the local oral/print media?  Yes  No

Special Arrangement/Request: (List all items that you would need from Student Activities.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Person in Charge of Activity	E-mail Address	Mailbox#	Telephone No.
<b>UNIVERSITY OFFICIAL TO SUPERVISE THE EVENT</b>			

\_\_\_\_\_  
President's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Advisor's Signature

\_\_\_\_\_  
Date

**CHECKLIST:** (please make sure that these things are in place)

- |   |   |
|---|---|
| <input type="checkbox"/> Cleaning/Security Deposit      | <input type="checkbox"/> Check Requisition(s) to cover expenses         |
| <input type="checkbox"/> Alcohol Permission request     | <input type="checkbox"/> List of students participating for Walk-A-Tons |
| <input type="checkbox"/> Name of Police Officers: _____ |   |

Name

Phone #

Name

Phone #

**DO NOT WRITE BELOW THIS LINE** \_\_\_\_\_

UVI Security Officer  cooler \_\_\_\_\_  cash pan \_\_\_\_\_  table \_\_\_\_\_

Other items \_\_\_\_\_

Approved:  Yes  No      Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Student Activities Supervisor      Date

\*Please walk with this form and contact security at 693-1530 before to open and after the event to secure the site\*

cc: Security, Physical Plant, Custodial, ITS, Cafeteria