Request for Approval to Serve Alcohol at a Campus Event

This form serves as a request to the Division of Enterprise Risk Management for permission to serve alcohol as part of a special event.

This request must be submitted to:

Amanda Alicea
Division of Enterprise Risk Management
Stony Brook University
180 Administration Bldg
Stony Brook, NY 11794
Office: 631-632-9572
Email: alcohol_Request@stonybrook.edu

This request form must be submitted no later than four (4) weeks prior to the scheduled event date. The event will not be approved unless this form is properly filled out and has all the appropriate signatures.

Please describe the event:

Name of Event: ____________________________________________________________

Sponsoring Department, Organization, etc.: ______________________________________

Location: ______________________ Date: __________________

Time From: __________ To: __________ Estimated Attendance: ______________

How is event being advertised? _____________________________________________

Is there a charge for food and non-alcoholic beverages? ______________________

Describe entertainment being provided: _______________________________________

Name(s) of event coordinator(s)/manager(s) on duty during the event: ____________

Who will be serving the alcohol? ____________________________________________

Number of persons serving alcohol: ______ Are persons serving alcohol over 21 years of age: _____

Will all attendees at the event be 21 years or older: _____

Will alcohol be served and consumed only on the premises: ____________________
Describe the procedures/safeguards that will assure that persons served are of legal drinking age (21) and do not consume excessive amounts of alcoholic beverages at the event:

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Please describe the alcohol service proposed for this event:

 Types of alcoholic beverages being served: ______________________________________

 Quantity of beverages available at the event: ____________________________________

 Is alcohol available at reduced pricing? ______________ Or, at no cost? ______________

 Who is catering food at the event? ____________________________________________

 Is there a charge for food and non-alcoholic beverages? ______________

 Describe the type and quantities of food and non-alcoholic beverages being provided: _________________________________________________________________

 Who is catering/providing alcohol for the event? ________________________________
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<th>Individual(s) coordinating event:</th>
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**FOR ENTERPRISE RISK MANAGEMENT USE ONLY:**

Date Received: ____________________________

_____Approved

_____Not Approved

_________________________________________  Date
Vice President for ERM (designee)

Comments:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________