

Office of Special Events & Protocol
 425 Santa Teresa Street
 Stanford, CA 94305-2245
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 f: (650) 725-0247
 stanfordevents@stanford.edu

Application for Use of University Facility (PE 100)

CONFIRMATION NO.

NAME OF UNIVERSITY SPONSOR (Dept. or Organization)				TITLE OF EVENT											
EVENT CONTACT PERSON				CONTACT PHONE				OFF-CAMPUS CO-SPONSOR (If Applicable)				CONTACT PHONE			
EMAIL OF CONTACT PERSON								FAX NUMBER OF CONTACT PERSON							

TYPE OF EVENT <i>Check Only One:</i>	Class	Conference	Dance	Drama	Film	Lecture	Music	Religious	Sports	Symposium	Other
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DATE(S) / DAY(S) OF WEEK	RESERVATION		EVENT TIMES		FACILITY(S) (BUILDING, ROOM NO., ETC.)	DESCRIPTION OF ACTIVITY (SET-UP, PERFORMANCE, ETC.)
	FROM	TO	FROM	TO		

OPEN TO THE PUBLIC? <input type="checkbox"/> YES <input type="checkbox"/> NO	DISABLED ACCESS? <input type="checkbox"/> YES <input type="checkbox"/> NO	WILL ANY FEE BE CHARGED? <input type="checkbox"/> YES <input type="checkbox"/> NO	PRICE	ANTICIPATED ATTENDANCE	FUNDRAISER <input type="checkbox"/> YES <input type="checkbox"/> NO	PROCEEDS RECIPIENT
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FOR SCHEDULING USE ONLY: SECURITY REQUIRED: <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, POLICE SIGNATURE REQUIRED: POLICE SIGNATURE _____	DATE _____
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NO. OF NON-STANFORD ATTENDEES (NOT STUDENTS, FACULTY OR STAFF): _____	WILL ALCOHOL BE SERVED? <input type="checkbox"/> YES <input type="checkbox"/> NO REFER TO POLICY: http://stanfordevents.stanford.edu/event_policies/regulations/regulations/alcohol.html
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DESCRIPTION OF EVENT (SPEAKERS' AND PARTICIPANTS' NAMES, FILM AND LECTURE TITLES, ETC.) PLEASE ATTACH ADDITIONAL PAGES AS NEEDED.

WORK REQUESTS (complete those needed)			
SR _____ = _____			
ELS _____ = _____			
SU-13 _____ = _____			
<input type="checkbox"/> UNIVERSITY DEPARTMENT	<input type="checkbox"/> OTHER	UNIVERSITY ACCOUNT NUMBER (PTA)	
BILLING ADDRESS			
Damage to facilities as a result of this event will be charged to the sponsoring organization			
UNIVERSITY SPONSOR CONTACT PERSON (TYPED)	AUTHORIZED SIGNATURE	DATE SIGNED	CAMPUS PHONE
ADDRESS WE SHOULD USE TO MAIL APPROVED APPLICATION			MAIL CODE

**Facilities will not be confirmed until this application is approved by
Stanford Events and returned to the sponsoring organization.**

APPROVED-STANFORD EVENTS	DATE APPROVED
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