

Building Utilization Request



Pioneer Career and Technology Center

ATTN: Director of Business Affairs
27 Ryan Road, Shelby, OH 44875

Handwritten initials

Part I - To be completed by organization requesting building utilization

Date(s) March 29, 30, 31st Activity: Day(s) Tues, Wed, Thurs Event Time(s) AM +PM labs	Setup Time 7:30	Tear Down Time 2:30	Date Request Submitted October 5, 2015 Room(s) / Area Requested: DLTC																		
Name of Organization and Event Being Held HSTW Survey		Number of Persons Attending Meeting																			
Address		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)																			
Contact Person: Vickie Hunt Phone Numbers: Home: _____ Work: 42921 Cell: _____		Business Name: _____ Contact Person: _____ Phone Number: _____ Address: _____																			
PCTC Requested Services: (Identify No. Needed) <table style="width:100%; border: none;"> <tr> <td style="border: none;"><u>Room Setup</u></td> <td style="border: none;"><u>Electronic</u></td> <td style="border: none;"><u>Café</u> OR <u>Culinary Arts</u></td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Chairs</td> <td style="border: none;"><input type="checkbox"/> Microphone</td> <td style="border: none;"><input checked="" type="checkbox"/> Drinks</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Tables</td> <td style="border: none;"><input type="checkbox"/> Ovrhd. Proj.</td> <td style="border: none;"><input checked="" type="checkbox"/> Snacks</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Chalkboard</td> <td style="border: none;"><input type="checkbox"/> Video Camera</td> <td style="border: none;"><input type="checkbox"/> Breakfast</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Lectern</td> <td style="border: none;"><input type="checkbox"/> Video Recorder</td> <td style="border: none;"><input type="checkbox"/> Luncheon</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Coat Racks</td> <td style="border: none;"><input type="checkbox"/> Internet Access</td> <td style="border: none;"><input type="checkbox"/> Dinner</td> </tr> </table> For specific room setup, see attached design: (check one) <input type="checkbox"/> Yes or <input type="checkbox"/> No		<u>Room Setup</u>	<u>Electronic</u>	<u>Café</u> OR <u>Culinary Arts</u>	<input type="checkbox"/> Chairs	<input type="checkbox"/> Microphone	<input checked="" type="checkbox"/> Drinks	<input type="checkbox"/> Tables	<input type="checkbox"/> Ovrhd. Proj.	<input checked="" type="checkbox"/> Snacks	<input type="checkbox"/> Chalkboard	<input type="checkbox"/> Video Camera	<input type="checkbox"/> Breakfast	<input type="checkbox"/> Lectern	<input type="checkbox"/> Video Recorder	<input type="checkbox"/> Luncheon	<input type="checkbox"/> Coat Racks	<input type="checkbox"/> Internet Access	<input type="checkbox"/> Dinner	If specific hookup/utility needs are required see attached: (check one) <input type="checkbox"/> Yes or <input type="checkbox"/> No Estimated time of arrival at Pioneer for setup/delivery: _____ Other/Specify: Water & Snacks through Cafeteria Date of contact with Cafeteria/Culinary Arts Services if used for this event: October 5, 2015	
<u>Room Setup</u>	<u>Electronic</u>	<u>Café</u> OR <u>Culinary Arts</u>																			
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Part II - To be completed by PCTC Personnel

Estimate Calculation of Fees: Attach any pertinent papers. Rental Custodial Services Food Services Other Total Fee Estimate Note: Final invoice billing based upon actual costs following the event/activity. Upon receipt of invoice, please make check payable to: <p style="text-align: center;">Pioneer CTC</p>	<p style="text-align: center;">Responsibility Notice</p> It is understood that our organization assumes full responsibility for any damage to the building and equipment. A Security Deposit in the amount of \$ _____ is required to confirm scheduling. This will be applied to final invoice upon satisfactory complete of event/activity. Any and all information on this form may be shared with the public through our publicly accessed calendar. <div style="text-align: center;"> Signature (person in charge of activity) </div> Date: _____												
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:30%;">Action Taken</th> <th style="width:30%;">Date</th> <th style="width:40%;">By</th> </tr> </thead> <tbody> <tr> <td>Approved and Booked</td> <td>10/5/2015</td> <td><i>[Signature]</i></td> </tr> <tr> <td>Billed for Services</td> <td></td> <td></td> </tr> <tr> <td>Referred to Board</td> <td></td> <td></td> </tr> </tbody> </table>	Action Taken	Date	By	Approved and Booked	10/5/2015	<i>[Signature]</i>	Billed for Services			Referred to Board			<p style="text-align: center;">Thank you for selecting Pioneer for your event!</p>
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