

# Building Utilization Request



# Pioneer Career and Technology Center

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

## Part I - To be completed by organization requesting building utilization

|  |                        |  |                   |  |               |                   |                      |               |                     |               |                   |                     |               |                |                       |                  |                   |                        |                 |  |  |               |  |  |  |
|--|------------------------|--|-------------------|--|---------------|-------------------|----------------------|---------------|---------------------|---------------|-------------------|---------------------|---------------|----------------|-----------------------|------------------|-------------------|------------------------|-----------------|--|--|---------------|--|--|--|
| Date(s) <b>August 16, 2018</b>   |                        | Setup Time   | Tear Down Time    | Date Request Submitted                               |               |                   |                      |               |                     |               |                   |                     |               |                |                       |                  |                   |                        |                 |  |  |               |  |  |  |
| Activity: Day(s) <b>Thursday</b>   |                        |  |                   | <b>June 12, 2018</b>                                 |               |                   |                      |               |                     |               |                   |                     |               |                |                       |                  |                   |                        |                 |  |  |               |  |  |  |
| Event Time(s) <b>7:00 am to 12:30 pm</b>   |                        | <b>6:30 AM</b>   | <b>12:30 PM</b>   | Room(s) / Area Requested:                            |               |                   |                      |               |                     |               |                   |                     |               |                |                       |                  |                   |                        |                 |  |  |               |  |  |  |
| Name of Organization and Event Being Held<br><b>Van Driver/Bus Driver Physicals</b>  |                        | Number of Persons Attending Meeting<br><b>70+</b>  |                   | <b>Exercise Science Lab and Criminal Justice Lab</b> |               |                   |                      |               |                     |               |                   |                     |               |                |                       |                  |                   |                        |                 |  |  |               |  |  |  |
| Address  |                        | Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)  |                   |  |               |                   |                      |               |                     |               |                   |                     |               |                |                       |                  |                   |                        |                 |  |  |               |  |  |  |
| Contact Person: <b>Karen Donahue/Mary Lee Barr</b>   |                        | Business Name: _____   |                   |  |               |                   |                      |               |                     |               |                   |                     |               |                |                       |                  |                   |                        |                 |  |  |               |  |  |  |
| Phone Numbers: Home: _____   |                        | Contact Person: _____  |                   |  |               |                   |                      |               |                     |               |                   |                     |               |                |                       |                  |                   |                        |                 |  |  |               |  |  |  |
| Work: _____ Cell: _____  |                        | Phone Number: _____  |                   |  |               |                   |                      |               |                     |               |                   |                     |               |                |                       |                  |                   |                        |                 |  |  |               |  |  |  |
| Address  |                        | Address: _____   |                   |  |               |                   |                      |               |                     |               |                   |                     |               |                |                       |                  |                   |                        |                 |  |  |               |  |  |  |
| PCTC Requested Services: (Identify No. Needed)   |                        | If specific hookup/utility needs are required see attached: (check one) <u>Yes</u> or <u>No</u>  |                   |  |               |                   |                      |               |                     |               |                   |                     |               |                |                       |                  |                   |                        |                 |  |  |               |  |  |  |
| <table border="0"> <tr> <td><u>Room Setup</u></td> <td><u>Electronic</u></td> <td><u>Café</u> OR</td> </tr> <tr> <td><u>Chairs</u></td> <td><u>Microphone</u></td> <td><u>Culinary Arts</u></td> </tr> <tr> <td><u>Tables</u></td> <td><u>Ovrhd. Proj.</u></td> <td><u>Drinks</u></td> </tr> <tr> <td><u>Chalkboard</u></td> <td><u>Video Camera</u></td> <td><u>Snacks</u></td> </tr> <tr> <td><u>Lectern</u></td> <td><u>Video Recorder</u></td> <td><u>Breakfast</u></td> </tr> <tr> <td><u>Coat Racks</u></td> <td><u>Internet Access</u></td> <td><u>Luncheon</u></td> </tr> <tr> <td></td> <td></td> <td><u>Dinner</u></td> </tr> </table> |                        | <u>Room Setup</u>  | <u>Electronic</u> | <u>Café</u> OR                                       | <u>Chairs</u> | <u>Microphone</u> | <u>Culinary Arts</u> | <u>Tables</u> | <u>Ovrhd. Proj.</u> | <u>Drinks</u> | <u>Chalkboard</u> | <u>Video Camera</u> | <u>Snacks</u> | <u>Lectern</u> | <u>Video Recorder</u> | <u>Breakfast</u> | <u>Coat Racks</u> | <u>Internet Access</u> | <u>Luncheon</u> |  |  | <u>Dinner</u> | Estimated time of arrival at Pioneer for setup/delivery:<br><b>if areas could be open and lights on by 6:30 am</b> |  |  |
| <u>Room Setup</u>  | <u>Electronic</u>      | <u>Café</u> OR   |                   |  |               |                   |                      |               |                     |               |                   |                     |               |                |                       |                  |                   |                        |                 |  |  |               |  |  |  |
| <u>Chairs</u>  | <u>Microphone</u>      | <u>Culinary Arts</u>   |                   |  |               |                   |                      |               |                     |               |                   |                     |               |                |                       |                  |                   |                        |                 |  |  |               |  |  |  |
| <u>Tables</u>  | <u>Ovrhd. Proj.</u>    | <u>Drinks</u>  |                   |  |               |                   |                      |               |                     |               |                   |                     |               |                |                       |                  |                   |                        |                 |  |  |               |  |  |  |
| <u>Chalkboard</u>  | <u>Video Camera</u>    | <u>Snacks</u>  |                   |  |               |                   |                      |               |                     |               |                   |                     |               |                |                       |                  |                   |                        |                 |  |  |               |  |  |  |
| <u>Lectern</u>   | <u>Video Recorder</u>  | <u>Breakfast</u>   |                   |  |               |                   |                      |               |                     |               |                   |                     |               |                |                       |                  |                   |                        |                 |  |  |               |  |  |  |
| <u>Coat Racks</u>  | <u>Internet Access</u> | <u>Luncheon</u>  |                   |  |               |                   |                      |               |                     |               |                   |                     |               |                |                       |                  |                   |                        |                 |  |  |               |  |  |  |
|  |                        | <u>Dinner</u>  |                   |  |               |                   |                      |               |                     |               |                   |                     |               |                |                       |                  |                   |                        |                 |  |  |               |  |  |  |
| For specific room setup, see attached design: (check one)<br><u>Yes</u> or <u>No</u>   |                        | Other/Specify: <b>set up 8/15/18 1 to 3 pm if needed</b><br><b>checking room use with Mike Millward,</b><br><b>Dan George and Eric Winbigler</b> |                   |  |               |                   |                      |               |                     |               |                   |                     |               |                |                       |                  |                   |                        |                 |  |  |               |  |  |  |
|  |                        | Date of contact with Cafeteria/Culinary Arts Services if used for this event: _____  |                   |  |               |                   |                      |               |                     |               |                   |                     |               |                |                       |                  |                   |                        |                 |  |  |               |  |  |  |

## Part II - To be completed by PCTC Personnel

## Responsibility Notice

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:  
**Pioneer CTC**

| Action Taken        | Date     | By  |
|---------------------|----------|-----|
| Approved and Booked | 7/3/2018 | KDB |
| Billed for Services |          |     |
| Referred to Board   |          |     |

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.**

*Karen Donahue*  
Signature (person in charge of activity)

Date: 6-12-18

It is the policy of Pioneer Career & Technology Center to use these funds for the direct use, improvement, and maintenance of the building utilization areas of the school.

Thank you for selecting Pioneer for your event!