

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) Thurs. Dec. 20, 2018		Setup Time	Tear Down Time	Date Request Submitted
Activity: Day(s) 1				December 10, 2018
Event Time(s) 9:30-11:08		Room(s) / Area Requested: DLTC		
Name of Organization and Event Being Held WyoTech and Lincoln Tech Presentations		Number of Persons Attending Meeting approx 50		
Address Pioneer		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)		
Contact Person: Jolene Young		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> </u> Yes or <u> </u> No		
<u> </u> Room Setup	<u> </u> Electronic	<u> </u> Café OR <u> </u> Culinary Arts		
<u> </u> Chairs	<u> </u> Microphone	<u> </u> Drinks		
<u> </u> Tables	<input checked="" type="checkbox"/> Ovrhd. Proj.	<u> </u> Snacks		
<u> </u> Chalkboard	<u> </u> Video Camera	<u> </u> Breakfast		
<input checked="" type="checkbox"/> Lectern	<u> </u> Video Recorder	<u> </u> Luncheon		
<u> </u> Coat Racks	<input checked="" type="checkbox"/> Internet Access	<u> </u> Dinner		
For specific room setup, see attached design: (check one)		Estimated time of arrival at Pioneer for setup/delivery: _____		
<u> </u> Yes	or <u> </u> No	Other/Specify: _____		
		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

It is understood that our organization assumes full responsibility for any damage to the building and equipment.

A Security Deposit in the amount of \$ 0 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.

Action Taken	Date	By
Approved and Booked	12/10/2018	JYB
Billed for Services		
Referred to Board		

Signature (person in charge of activity)
Jolene Young

Date: 12/10/2018

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!