

THE UNIVERSITY OF TEXAS-PAN AMERICAN

Application For Use of Alcoholic Beverages

(Must be submitted at least 15 business days prior to an event)

Upon submittal of this form, I attest that I have reviewed and will comply with HOP 4.9.1 Alcohol Beverage and the Guidelines for Alcohol Service at University Events. Submit complete form to: Gilbert.Garza@sodexo.com, Mail to: UCDIN or Contact 956-665-7485

1.	Department/Individual:				
2.	Requestor:	Email:	Phone:		
3.	Event Name: Est. Number of Guests:				
4.	Date of Event: Alcohol Serving Time From:		To:		
5.	Type of Alcohol: (Check all that apply): Beer	Wine Liquo	r Other (Specify):		
6.	Event Location for Dispensing: * If off campus, requestor is required to comply with	On Car	. — .		
7. Designated Server(s) Shall be University's food service contractor. If not, specify reason for consideration of exception and indicate suggested server(s):				ed server(s):	
8.	Method of Alcoholic Beverage Dispensing:				
	Sold by drink over the counter for cash Served per drink over the counter and billed to h		·	xets per person.	
9.					
	UTPA Faculty/Staff UTPA Alumni UTPA Students Non-University Guest				
10.	Will there be persons under the age of 21 in attendance? YES NO				
	IF YES, HOSTS OF THE EVENT MUST IMPLEMENT PRECAUTIONARY MEASURES TO ENSURE THAT ALCOHOLIC BEVERAGES ARE NOT ACCESSIBLE OR SERVED TO PERSONS UNDER THE LEGAL DRINKING AGE.				
11.	1. Will admission fee charged?				
12.	Will food to be served? YES NO				
	If Yes, Food to be provided by (check one):	ne): UTPA Food Service Caterer Off Campus Caterer Brought by Host			
	3. Will non-alcoholic drinks to be served? YES NO				
14.	4. a. Has a UTPA Police Service Request been submitted for this event? YES NO b. If 'No', is a Police Service Waiver requested for this event?* YES NO (*Must have less than 30 guests and no students in attendance to be eligible.)				
15.	Contact person at event:				
	(Contact person is responsible for identifying him/hers	elf to police officers at beginning of e	vent and for verifying display of TABC catering	permit.)	
	certify that I have read, understood, and will comply with icilities.	UTPA policies and guidelines regard	ing the sale and consumption of alcoholic beverag	ges on the UTPA grounds and	
Sig	ignature of Requestor	Date Signa	ture of Department Head	Date	
ВE	ECOMMENDATION APPROVAL	DISAPPROVAL			
KE	ALTROVAL ALTROVAL	DISALIKOVAL	Signature of General Manager, Food Services	Date	
A D	PPROVAL GRANTED	DENIED			
Аľ	ITROVAL GRANTED		Signature of Dean of Students or Designee	Date	
			(approval required if students will be attending	the event)	
AP	PPROVAL GRANTED	DENIED	Cinnetum of Dun't L. D.		
RE	EV. 8/11/2014		Signature of President or Designee	Date	