ATTACHMENT A
University of West Georgia Alcohol Request Form
[Third Parties will also complete a Facility Use Agreement]

The University of West Georgia recognizes the legality of alcohol use for individuals of appropriate age, but expects everyone to abide by the expectations concerning alcohol outlined in UWG’s policy and procedures at www.westga.edu/policy. Before submitting this form, you should review UWG PL 7006, Alcohol and Tobacco on Campus and its procedures. Please complete all sections, including required signatures, before submitting this form to the Chief Auxiliary Officer at least ten (10) business days prior to your event. A copy of the completed form must be available for inspection at all times at the site of the event. Completion of this form does not guarantee authorization.

Exception: The President may approve requests without the approval of, or in the absence of, the Chief Legal or Auxiliary Officer(s).

Organization

Name of sponsoring organization/department: ___________________________________________________________________
Name of organizer representative: ___________________________________________________________________ Phone:
________________________________________________________________________Email: __________________________ Date Submitted: ____________ Event

Date of the event: ________________ Location: __________________________ Start/End time: _______________

Check one: Beer & Wine only: Full Bar: Proposed number of bar stations:

Will Students attend or have access to the Event? Yes: No:

Designated Responsible Employee – must be at least 21 years of age

☐ I have read the University’s Alcohol and Tobacco Policy (UWG PL 7006 and Associated Procedures) and agree to assume responsibility for strict adherence to the appropriate laws and policies for serving alcoholic beverages.

Print name: ___________________________________ Student/Staff ID #: __________________________

Signature: ___________________________________ Phone: ______________________ Date Signed: ______________

Check here if the Event is faculty/staff only, and access to alcohol will be self-service. Sign Sec. 1 below, and submit for approval.

SIGNATURES REQUIRED BELOW
Signatures confirm that the Organizer has discussed the Procedures for this event with necessary parties and that the Organizer confirms that the arrangements comply with University Policy and State law.

Any outside vendor that provides alcohol must have on file a current pouring permit with Auxiliary Services and a completed Facilities Use Agreement.

1. Faculty/Staff Advisor – for student organizations, Dean of Students; for Faculty, Department Chair

Print name: ___________________________________ Title: ____________________________________________

Signature: ___________________________________ Date: ______________________________________

2. Facility – the director of the facility being used, or Auxiliary Services (Facility must contact Police and Risk Management of event)

Print name: ___________________________________ Title: ____________________________________________ Signature:

_________________________________________ Date: ______________________________________

Approved by Chief Auxiliary Officer: [Signed] __________________________ Date: ________________________