**Western New England University-** Community Standards and Education

**Request to Provide Alcoholic Beverages**

The use of limited alcoholic beverages within the Western New England University community may be sanctioned provided such use is in accord with the laws of the Commonwealth of Massachusetts and the provisions of the Alcohol Policy. By virtue of this request, the sponsor accepts the responsibility for the onsite supervision of service and acknowledges resulting obligations.

All information must be completed in order for consideration to be given. If appropriate, this request must be accompanied by an application for campus facilities. The sponsor should also note that at least a week is required by the City of Springfield to process license requests. When requesting to serve alcohol at a large social event on campus, please attach a diagram of the floor plan including method of service and control.

**PART A. GENERAL INFORMATION**

1. Name or Nature of Event: Click here to enter text.

2. Date of Event: Click here to enter a date. 3. Scheduled Time: Start Time: Choose an item. End Time: Choose an item.

4. Sponsor: Click here to enter text.

5. Location of Event: Click here to enter text.

6. Event Open To: Students  Staff  General Public  Alumni  7. Expected Attendance:

8. Are Guests Permitted? Yes  No  If yes, please include an explanation and guest list.

9. Requested Alcoholic Beverages: Beer  Wine  Champagne  Wine Cooler

Quantity:

**PART B. HOST LIABILITY & RESPONSIBILITY**

10. Will Alcoholic Beverages Be Sold? Yes  No

11. Pricing (Per Single Portion): Beer: 0.00 Wine: 0.00 Champagne: 0.00Wine Cooler: 0.00

12. Method of Serving: Bar  Table  Combination

13. Method of Service Control (Be Specific): Printed Birthday List  Wristbands  Sectioned “Of Age” Area  Third Party Establishment (Off Campus Venue)  Third Party Distribution  Other

14. Designated Server(s) Name(s): Click here to enter text.

15. Person(s) Responsible for Event & Providing Instruction to Server(s) as to Host Liability/Service Control: Click here to enter text.

16. If License Required, Name(s) of Person(s) Listed as License Agents: Click here to enter text.

17. **Non-Alcoholic beverages and substantial food must be served and prominently displayed for ready accessibility.** List below and provide pricing information per service portion. If there is to be no charge, please indicate below.

Non-Alcoholic Beverages: Click here to enter text. Food/Price per portion: Click here to enter text.

Requested By: Click here to enter text. Date Submitted:

Direct Phone Number: Click here to enter text.Email Address: Click here to enter text.

FOR OFFICE USE ONLY

Received: License Required: Yes  No

Facility Assigned: Reservation # (If Applicable):

Request Approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Campus Police Letter Required For City License

Quantity Approved: Beer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Wine \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Champagne \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Wine Cooler \_\_\_\_\_\_\_\_\_\_\_\_\_

Request Denied: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Distribution: Sponsor/Host; Dean of Students; Campus Police; Campus Events; File; Food Services/Catering