## Request to Serve Alcohol Form

\*NOTE: Please submit completed form to the Student Life Office (Student Center, suite 218) at least one week prior to the event. If exceptions are needed, please submit at least three weeks in advance. Questions? Please contact Derek Morgan at 303-273-3288.

Event Name:			
Event Date:	Event Time: _	 From	То
Location (please be specific):			
Group Sponsoring Event:			
Person Responsible for the Event:			
Phone:	Email:		
Expected number of attendees?	Who will be che	ecking IDs?	
Undergraduate Students		Third Party Vendor	
Graduate Students		Security Staff	
Faculty/Staff Members		Not required as all will be	over 21
Other		Other:	
From where will you purchase/obtain the alcohol?			
THIRD-PARTY VENDOR:		Phone:	
SECURITY PROVIDER:		Phone:	
SIGNATURES: By signing this form you are agreeing to all aspects of th	e alcohol policy ar	nd will enforce the policy a	s needed.
Signature: Person responsible for the event	Signature: Organ	ization Officer or Advisor; D	epartment Head;
For official use only – do not write in this box			
Submitted:	Signature: Acade	emic Affairs (Academic De	nts events only)
Approved:			
	Signature: Associ	ate Dean of Students	