## Building Utilization Request



## **Pioneer Career and Technology Center**

ATTN: Director of Business Affairs 27 Ryan Road, Shelby, OH 44875

Taiti- 10 00 comp	neted by organizati	on requestin	ig bunun	ıg uu	ization	
Date(s) 9/1/2020-12/7/2020		Setup T	up Time	Tear Down	Date Request Submitted	
Activity: Day(s) Monday and Wednesday					Time	August 11, 2020
Event Time(s) 5:00pm-9:00pm						Room(s) / Area Requested:
Name of Organization and Event Being Held					f Persons	W133 & W135 Medical
Adult Education- Phlebotomy			Att	Attending Meeting Technologies and Classroom		
Address 27 Ryan Road Shelby OH 44875				Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)		
Contact Person: D.Paullin/J.Eldridge/J.Loudermilk				Business Name:		
Phone Numbers: Home:				Contact Person:		
Work: <b>419 342-</b>	<del></del>			ne Nun	-1- a	A CONTRACTOR CONTRACTOR AND A CONTRACTOR CON
				Address:		
PCTC Requested Services: (Identify No. Needed)				If specific hookup/utility needs are required see attached:		
<u>Café</u> OR			-	(check one)Yes orNo		
Room Setup Ele	ectronic .	Culinary Art	s Estin	mated	time of arrival	at Pioneer for setup/delivery:
Chairs	Microphone	Drinks				
Tables	_Ovrhd. Proj.	Snacks	Othe	er/Spe	cify:	
Chalkboard	_Video Camera	Breakfa	st			
Lectern	_Video Recorder	Lunched	on			
Coat Racks	Internet Access	Dinner				
For specific room setup, see attached design: (check one)			Date	Date of contact with Cafeteria/Culinary Arts Services		
Yes or No				if used for this event:		
Part II - To be completed by PCTC Personnel				- 4	Respon	sibility Notice
Estimate Calculation of Fees: Attach any pertinent papers.				It is understood that our organization assumes full responsibility for any damage to the building and		
Rental						
Custodial Services				uipme	nt.	
Food Services				A Security Deposit in the amount of \$		
Other				is required to confirm scheduling. This will be		
Total Fee Estimate				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.		
<b>Note:</b> Final invoice billing based upon actual costs following the event/activity.						
Upon receipt of invoice, please make check payable to:  Pioneer CTC			o: sha			
Action Taken	Date	Ву		, 1	<u> </u>	1
Approved and Booked 8/13/2020 Mg				Signature (person in charge of activity)  Date: 8-11-20		
Billed for Services						
Referred to Board			Da			

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!