

# Building Utilization Request



# Pioneer Career and Technology Center

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

**Part I - To be completed by organization requesting building utilization**

Date(s) <b>May 2, 2016</b> Activity: Day(s) <b>Monday</b> Event Time(s) <b>10:30 am to 1:00 pm</b>	Setup Time	Tear Down Time	Date Request Submitted <p style="text-align: center;"><b>April 27, 2016</b></p> Room(s) / Area Requested: <p style="text-align: center;"><b>Pioneer Room</b></p>																					
Name of Organization and Event Being Held <b>Pioneer School Bus Driver/Transportation Appreciation Luncheon</b>		Number of Persons Attending Meeting <p style="text-align: center;"><b>25</b></p>																						
Address		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)																						
Contact Person: <b>Karen Donahue</b> Phone Numbers: Home: _____ Work: _____ Cell: _____		Business Name: _____ Contact Person: _____ Phone Number: _____ Address: _____																						
PCTC Requested Services: (Identify No. Needed) <table style="width:100%; border: none;"> <tr> <td style="width:33%;"></td> <td style="width:33%; text-align: center;"><u>Café</u> OR</td> <td style="width:33%;"></td> </tr> <tr> <td><u>Room Setup</u></td> <td style="text-align: center;"><u>Electronic</u></td> <td style="text-align: center;"><input checked="" type="checkbox"/> <u>Culinary Arts</u></td> </tr> <tr> <td><input checked="" type="checkbox"/> Chairs</td> <td><input type="checkbox"/> Microphone</td> <td><input type="checkbox"/> Drinks</td> </tr> <tr> <td><input checked="" type="checkbox"/> Tables</td> <td><input type="checkbox"/> Ovrhd. Proj.</td> <td><input type="checkbox"/> Snacks</td> </tr> <tr> <td><input type="checkbox"/> Chalkboard</td> <td><input type="checkbox"/> Video Camera</td> <td><input type="checkbox"/> Breakfast</td> </tr> <tr> <td><input type="checkbox"/> Lectern</td> <td><input type="checkbox"/> Video Recorder</td> <td><input checked="" type="checkbox"/> Luncheon</td> </tr> <tr> <td><input type="checkbox"/> Coat Racks</td> <td><input type="checkbox"/> Internet Access</td> <td><input type="checkbox"/> Dinner</td> </tr> </table> For specific room setup, see attached design: (check one) <input type="checkbox"/> <b>Yes</b> or <input type="checkbox"/> <b>No</b>			<u>Café</u> OR		<u>Room Setup</u>	<u>Electronic</u>	<input checked="" type="checkbox"/> <u>Culinary Arts</u>	<input checked="" type="checkbox"/> Chairs	<input type="checkbox"/> Microphone	<input type="checkbox"/> Drinks	<input checked="" type="checkbox"/> Tables	<input type="checkbox"/> Ovrhd. Proj.	<input type="checkbox"/> Snacks	<input type="checkbox"/> Chalkboard	<input type="checkbox"/> Video Camera	<input type="checkbox"/> Breakfast	<input type="checkbox"/> Lectern	<input type="checkbox"/> Video Recorder	<input checked="" type="checkbox"/> Luncheon	<input type="checkbox"/> Coat Racks	<input type="checkbox"/> Internet Access	<input type="checkbox"/> Dinner	If specific hookup/utility needs are required see attached: (check one) <input type="checkbox"/> <b>Yes</b> or <input type="checkbox"/> <b>No</b> Estimated time of arrival at Pioneer for setup/delivery: _____ Other/Specify: _____ _____ _____ _____	
	<u>Café</u> OR																							
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		Date of contact with Cafeteria/Culinary Arts Services if used for this event: _____																						

**Part II - To be completed by PCTC Personnel** **Responsibility Notice**

Estimate Calculation of Fees: Attach any pertinent papers.

Rental .....	_____
Custodial Services .....	_____
Food Services .....	_____
Other .....	_____
<b>Total Fee Estimate</b>	_____

**Note:** Final invoice billing based upon actual costs following the event/activity.

Upon receipt of invoice, please make check payable to:  
**Pioneer CTC**

Action Taken	Date	By
Approved and Booked	4/27/16	KWB
Billed for Services		
Referred to Board		

It is understood that our organization assumes full responsibility for any damage to the building and equipment.

A Security Deposit in the amount of \$ \_\_\_\_\_ is required to confirm scheduling. This will be 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.**

Karen Donahue

Signature (person in charge of activity)

Date: \_\_\_\_\_

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!**