

# 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>8/16/2017</b>   |  | Setup Time  | Tear Down Time | Date Request Submitted<br><b>May 30, 2017</b>                       |
| Activity: Day(s) <b>Wednesday</b>  |  |   |                | Room(s) / Area Requested:<br><b>Arena/DLTC/Comm. Room/Cafeteria</b> |
| Event Time(s) <b>7:30-3:30</b>   |  |   |                |   |
| Name of Organization and Event Being Held<br><b>Pioneer Returning Teacher Day</b>  |  | Number of Persons Attending Meeting<br><b>200</b>   |                |   |
| Address  |  | Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)   |                |   |
| Contact Person: <b>Kris Kowalski, ext. 42202</b>   |  | Business Name: _____  |                |   |
| Phone Numbers: Home: _____   |  | Contact Person: _____   |                |   |
| Work: _____ Cell: _____  |  | Phone Number: _____   |                |   |
| PCTC Requested Services: (Identify No. Needed)   |  | Address: _____  |                |   |
| <input type="checkbox"/> Café OR<br><input checked="" type="checkbox"/> Room Setup <input checked="" type="checkbox"/> Electronic <input type="checkbox"/> Culinary Arts<br><input checked="" type="checkbox"/> Chairs <input checked="" type="checkbox"/> Microphone <input type="checkbox"/> Drinks<br><input checked="" type="checkbox"/> Tables <input type="checkbox"/> Ovrhd. Proj. <input type="checkbox"/> Snacks<br><input type="checkbox"/> Chalkboard <input type="checkbox"/> Video Camera <input checked="" type="checkbox"/> Breakfast<br><input checked="" type="checkbox"/> Lectern <input type="checkbox"/> Video Recorder <input checked="" type="checkbox"/> Luncheon<br><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"/> Yes or <input checked="" type="checkbox"/> No<br>Estimated time of arrival at Pioneer for setup/delivery: _____<br>Other/Specify: <b>set up will be finalized by Kris Kowalski and breakfast/lunch with J. Fortman</b> |                |   |
| For specific room setup, see attached design: (check one)<br><input type="checkbox"/> Yes or <input checked="" type="checkbox"/> No  |  | 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 .....

**Total Fee Estimate** .....

**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 | 6/12/17 | [Signature] |
| 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.**

**[Signature]**  
Signature (person in charge of activity)

Date: **6/18/17**

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!**