Building Utilization Request



Pioneer Career and Technology Cente

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

Parillalio be completed by organization requesting building willization				
Date(s) Feb. 12, Feb. 13, 2018	Setup Time	Tear Down	Date Request Submitted	
Activity: Day(s) Monday, Tuesday		Time	January 31, 2018	
Event Time(s) 8:20 and 11:50	none	none	Room(s) / Area Requested:	
Name of Organization and Event Being Held		of Persons	DLTC	
Pioneer Career Development		Attending Meeting Less than 50		
Table Tops participant orientation meetings		Services to be provided by outside person(s)/vendors		
Address		(i.e. caterer, photographer, etc.)		
Contact Person: Jim Sorenson	Business N	Business Name:		
Phone Numbers: Home:	Contact Person:			
Work: 42922 Cell:	Phone Nur	Phone Number:		
	Address:	Address:		
PCTC Requested Services: (Identify No. Needed)	If specific	If specific hookup/utility needs are required see attached:		
<u>Café</u> OR	l '	(check one)Yes orNo		
Room Setup <u>Electronic</u> <u>Culinary Art</u>	s Estimated	Estimated time of arrival at Pioneer for setup/delivery:		
Chairs Microphone Drinks	<u> </u>			
Tables Ovrhd. Proj Snacks	Other/Spe	Other/Specify:		
Chalkboard Video Camera Breakfa	st			
Lectern Video Recorder Lunched	on			
Coat RacksInternet AccessDinner				
For specific room setup, see attached design: (check one)		Date of contact with Cafeteria/Culinary Arts Services		
Yes or X No	if used fo	if used for this event:		
Ran III - Rolbe completed by PCIIC Personnel Responsibility Notice				
Estimate Calculation of Fees: Attach any pertinent papers. It is understood that our organization assumes full				
Rental \$0.00				
Custodial Services 0.00 equipment.				
Food Services	0.00 A Security Deposit in the amount of \$			
		quired to confirm scheduling. This will be		
I Total Kaa Ketimata SII 001		applied to final invoice upon satisfactory complete of event/activity.		
Note: Final invoice billing based upon actual costs	event/ac	cuvity.		
following the event/activity.		Any and all information on this form may be		
Upon receipt of invoice, please make check payable		shared with the public through our publicly		
Pioneer CTC		accessed calendar.		
Action Taken Date By		$\langle \rangle \langle$		
Approved and Booked 2/1/2018 74	51-4	1/2		
Billed for Services		/	son in charge of activity)	
Referred to Board	Date: _		3/ \(\langle \)	