Building Utilization Request



these funds for the direct use, improvement, and maintenance of the building utilization areas of the school.

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) 2/3/2025 - 5/7/2025			Setup Time	Tear Down	Date Request Submitted	
Activity: Day(s) Mondays & Wednesdays				Time	January 2, 2025	
Event Time(s)	4:30 - 8:30pm		n/a	n/a	Room(s) / Area Requested:	
Name of Organization and	nd Event Being Held	l	Number o		W-131	
Phlebotomy classes - Adult Ed			Attending	Attending Meeting		
			Comisso	24 Services to be provided by outside person(s)/vendors		
Address 27 Ryan Road			(i.e. caterer, photographer, etc.)			
Contact Person: D. Paullin/J. White			Business N	Business Name:		
Phone Numbers: Home:			Contact Pe	Contact Person:		
Work: 419 342-1100 Cell:			Phone Nun	Phone Number:		
				Address:		
PCTC Requested Service	ded)		If specific hookup/utility needs are required see attached:			
<u>Café</u> OR				(check one) Yes or No		
<u>Room Setup</u> <u>Electro</u>	_	Culinary Arts	Estimated	time of arriva	l at Pioneer for setup/delivery:	
	licrophone	Drinks				
	vrhd. Proj.		Other/Spe	cify:		
		Breakfas				
		Luncheo	n			
Coat Racks Internet Access Dinner						
For specific room setup, see attached design: (check one)				Date of contact with Cafeteria/Culinary Arts Services		
Yes orNo			if used for	if used for this event:		
Part II - To be completed by PCTC Personnel				Responsibility Notice		
Estimate Calculation of Fees: Attach any pertinent papers.				It is understood that our organization assumes full		
Rental		· · ·	responsibility for any damage to the building and			
Custodial Services		equipme	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.		
Note: Final invoice billing based upon actual costs			event/ac	urvity.		
following the event/activity.			— Any and	Any and all information on this form may be		
Upon receipt of invoice, please make check payable to:			shared	shared with the public through our publicly		
Pioneer CTC			accessed	accessed calendar.		
Action Taken		By		1	1 ISTAD	
Approved and Booked	1/1/25	MR		JUK		
Billed for Services			Data:	Signature (per	son in charge of activity) $7/75$	
Referred to Board	Career 9 Technolo	Contente	Date:		time Diaman for	
It is the policy of Pioneer 0	Sareer & recimology	venter to t	ise inank	you for selec	ting Pioneer for your event!	

Revised 07/15