

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) 10/14/2025-10/15/2025		Setup Time 7:00	Tear Down Time 2:35	Date Request Submitted May 27, 2025
Activity: Day(s) Tues. & Weds.				Room(s) / Area Requested: Program Labs/Adm. Conf. Room
Event Time(s) 7:30-2:30				
Name of Organization Lab Picture Days		Number of Persons Attending Meeting		
Address		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)		
Contact Person: Tina Hurst, ext. 42200		Business Name: _____		
Phone Numbers: Home: _____		Contact Person: _____		
Work: _____ Cell: _____		Phone Number: _____		
PCTC Requested Services: (Identify No. Needed)		Address: _____		
<u>Room Setup</u>	<u>Electronic</u>	<u>Café/Culinary Arts</u>		
Chairs	Microphone	Drinks		
Tables	Ovrhd. Proj.	Snacks		
Chalkboard	Video Camera	Luncheon		
Lectern	Video Recorder	Dinner		
Coat Racks	Internet Access			
For specific room setup, see attached design: (check one) <input type="checkbox"/> Yes or <input checked="" type="checkbox"/> No		attached: (check one) <input type="checkbox"/> Yes or <input type="checkbox"/> No		
		Estimated time of arrival at Pioneer for setup/delivery _____		
		Other/Specify: Photo staff will use the Admin. Conf. Room as their "home base" while taking pics of labs		
		Date of contact with Cafeteria/Culinary Arts Services if used for this event _____		

Part II - To be completed by PCTC Personnel

Estimate Calculation of Fees: Attach any pertinent paper		
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	6/9/25	YWK
Billed for Services		
Referred to Board		

Responsibility Notice

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.

Signature (person in charge of activity)

Date: _____

Thank you for selecting Pioneer for your event!

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.