

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) 2/2/26-5/6/26		Setup Time	Tear Down Time	Date Request Submitted
Activity: Day(s) Mondays and Wednesdays				January 29, 2026
Event Time(s) 4:30-8:30pm				Room(s) / Area Requested: W131 and/or W135/133
Name of Organization and Event Being Held Adult Ed - Phlebotomy class		Number of Persons Attending Meeting		
Address 27 Ryan Road Shelby OH 44875		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)		
Contact Person: D. Paullin/J. White		Business Name: _____		
Phone Numbers: Home: _____		Contact Person: _____		
Work: 419 342-1100 Cell: _____		Phone Number: _____		
		Address: _____		
PCTC Requested Services: (Identify No. Needed)		If specific hookup/utility needs are required see attached: (check one) <u>Yes</u> or <u>No</u>		
<u>Café</u> OR <u>Culinary Arts</u>		Estimated time of arrival at Pioneer for setup/delivery: _____		
Room Setup	Electronic	Other/Specify: _____		
Chairs	Microphone	_____		
Tables	Ovrhd. Proj.	_____		
Chalkboard	Video Camera	_____		
Lectern	Video Recorder	_____		
Coat Racks	Internet Access	_____		
	Drinks	_____		
	Snacks	_____		
	Breakfast	_____		
	Luncheon	_____		
	Dinner	_____		
For specific room setup, see attached design: (check one)		Date of contact with Cafeteria/Culinary Arts Services if used for this event: _____		
<input checked="" type="checkbox"/> Yes or <input type="checkbox"/> No				

Part II - To be completed by PCTC Personnel

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	1/30/26	JK
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.

Any and all information on this form may be shared with the public through our publicly accessed calendar.

Signature (person in charge of activity)

Date: 1/29/26

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.