

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) 5/22/2026 Activity: Day(s) 1 Event Time(s) 8am-4:00pm	Setup Time 8am	Tear Down Time 4:00pm	Date Request Submitted April 13, 2026 Room(s) / Area Requested: C114
Name of Organization and Event Being Held Adult Ed CNA testing	Number of Persons Attending Meeting 17		
Address	Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)		
Contact Person: Don Paullin Phone Numbers: Home: _____ Work: _____ Cell: _____	Business Name: _____ Contact Person: _____ Phone Number: _____ Address: _____		
PCTC Requested Services: (Identify No. Needed) _____ <u>Café</u> OR _____ <u>Culinary Arts</u> Room Setup <u>Electronic</u> _____ Chairs _____ Microphone _____ Drinks _____ Tables _____ Ovrhd. Proj. _____ Snacks _____ Chalkboard _____ Video Camera _____ Breakfast _____ Lectern _____ Video Recorder _____ Luncheon _____ Coat Racks _____ Internet Access _____ Dinner For specific room setup, see attached design: (check one) _____ Yes or _____ No	If specific hookup/utility needs are required see attached: (check one) _____ Yes or _____ No Estimated time of arrival at Pioneer for setup/delivery: _____ Other/Specify: _____ _____ _____ 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 <p style="text-align: center;">Total Fee Estimate _____</p> Note: Final invoice billing based upon actual costs following the event/activity. Upon receipt of invoice, please make check payable to: <p style="text-align: center;">Pioneer CTC</p>	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. <div style="text-align: right;"> _____ Signature (person in charge of activity) Date: <u>4/13/26</u> </div>												
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:30%;">Action Taken</th> <th style="width:30%;">Date</th> <th style="width:40%;">By</th> </tr> </thead> <tbody> <tr> <td>Approved and Booked</td> <td>4/16/26</td> <td>DK</td> </tr> <tr> <td>Billed for Services</td> <td></td> <td></td> </tr> <tr> <td>Referred to Board</td> <td></td> <td></td> </tr> </tbody> </table>	Action Taken	Date	By	Approved and Booked	4/16/26	DK	Billed for Services			Referred to Board			<p style="text-align: center;">Thank you for selecting Pioneer for your event!</p>
Action Taken	Date	By											
Approved and Booked	4/16/26	DK											
Billed for Services													
Referred to Board													