

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) 5/5/2026	Setup Time	Tear Down Time	Date Request Submitted
Activity: Day(s) 1	8am	11:30am	April 13, 2026
Event Time(s) 8am-11:30am			Room(s) / Area Requested: Community Room
Name of Organization and Event Being Held NHA - Phlebotomy testing for high school		Number of Persons Attending Meeting 15	
Address		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)	
Contact Person: Don Paullin		Business Name: _____	
Phone Numbers: Home: _____		Contact Person: _____	
Work: _____ Cell: _____		Phone Number: _____	
Address: _____		Address: _____	
PCTC Requested Services: (Identify No. Needed)		If specific hookup/utility needs are required see attached: (check one) <u> </u> Yes or <u> </u> No	
<u> </u> Café OR	<u> </u> Culinary Arts	Estimated time of arrival at Pioneer for setup/delivery: _____	
<u> </u> Room Setup	<u> </u> Electronic	Other/Specify: _____	
<u> </u> Chairs	<u> </u> Microphone	_____	
<u> </u> Tables	<u> </u> Ovrhd. Proj.	_____	
<u> </u> Chalkboard	<u> </u> Video Camera	_____	
<u> </u> Lectern	<u> </u> Video Recorder	_____	
<u> </u> Coat Racks	<u> </u> Internet Access	_____	
<u> </u> Drinks	<u> </u> Snacks	Date of contact with Cafeteria/Culinary Arts Services if used for this event: _____	
<u> </u> Breakfast	<u> </u> Luncheon		
<u> </u> Dinner			
For specific room setup, see attached design: (check one)			
<u> </u> Yes or <u> </u> No			

Part II - To be completed by PCTC Personnel

Responsibility Notice

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

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.

Donald Paull
Signature (person in charge of activity)

Date: 4/13/26

Action Taken	Date	By
Approved and Booked	4/16/26	DK
Billed for Services		
Referred to Board		

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.

Thank you for selecting Pioneer for your event!