Building Utilization Request

Pioneer CAREER & TECHNOLOGY CENTER

Pioneer Career and Technology Cente

ATTN: Director of Business Affair
27 Ryan Road, Shelby, OH 4487

Part I - To be completed by organization requesting building utilization

Activity: Date(s) 9/9, 9/16, 10/21, 11/18, 12/16, 1/20 2/17, 3/17, 4/21, 5/19 Day(s) 3rd Wed. of month Event Time(s) 2:30 pm	Setup Time 2:30	Tear Down Time	Date Request Submitted 5/28/2026 Room(s) / Area Requested: Cafeteria

Name of Organization and Event Being Held: EAP General Meeting

Number of Persons Attending Meeting: ~40

Address:

Contact Person: Jeni Stewart

Phone Numbers: Home: _____ Work: _____ Cell: _____

Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)

Business Name: _____

Contact Person: _____

Phone Number: _____

Address: _____

PCTC Requested Services: (Identify No. Needed)

Room Setup	Electronic	Café OR Culinary Arts
X Chairs	___ Microphone	___ Drinks
X 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

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	6/9/26	[illegible]
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.

Jennifer Stewart

Signature (person in charge of activity)

Date: 5/28/2026

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