

# Building Utilization Request



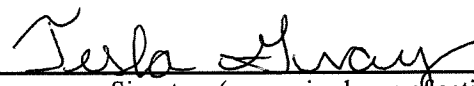
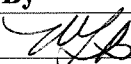
## Pioneer Career and Technology Center

ATTN: Director of Business Affairs  
27 Ryan Road, Shelby, OH 44875

### Part I - To be completed by organization requesting building utilization

Date(s) <b>May 20 2021</b>		Setup Time <b>8:30am Thu</b>	Tear Down Time <b>2:30pm Thu</b>	Date Request Submitted <b>March 26, 2021</b>
Activity: Day(s) <b>Thurs</b>				Room(s) / Area Requested: <b>Preschool Room</b>
Event Time(s) <b>AM 9:30am/PM 1:00pm</b>				
Name of Organization <b>ECE - Preschool Graduation Thu on ZOOM in Preschool room</b>		Number of Persons Attending Meeting <b>10</b>		
Address		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)		
Contact Person: <b>Tesla Gray</b>		Business Name: _____		
Phone Numbers: Home: _____		Contact Person: _____		
Work: <b>ext 42600</b> Cell: _____		Phone Number: _____		
PCTC Requested Services: (Identify No. Needed)		Address: _____		
<u>Room Setup</u>	<u>Electronic</u>	If specific hookup/utility needs are required see attached: (check one) <u>Yes</u> or <u>No</u>		
<u>Chairs</u>	<u>Microphone</u>	Estimated time of arrival at Pioneer for setup/delivery: _____		
<u>Tables</u>	<u>Ovrhd. Proj.</u>	Other/Specify: _____		
<u>Chalkboard</u>	<u>Video Camera</u>	_____		
<u>Lectern</u>	<u>Video Recorder</u>	_____		
<u>Coat Racks</u>	<u>Internet Access</u>	_____		
For specific room setup, see attached design: (check one) <u>Yes</u> or <u>X No</u>		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 ..... <b>Total Fee Estimate</b> ..... <b>Note:</b> Final invoice billing based upon actual costs following the event/activity. Upon receipt of invoice, please make check payable to: <b>Pioneer CTC</b>			<b>Responsibility Notice</b>  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: <u>3/25/2021</u>
<b>Action Taken</b>	<b>Date</b>	<b>By</b>	
Approved and Booked	<u>3/29/2021</u>		
Billed for Services			
Referred to Board			

**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.