



Alcohol Approval Request

- Submit completed request to Divisional Vice President or President at least two weeks in advance of the event
- Forward **APPROVED** form to Aramark Catering:
 - Crimson-catering@iup.edu
 - Aramark Catering office is located in the Kovalchick Convention and Athletic Complex
 - 724-357-5709
- PASSHE funds CAN NOT be used to pay for alcohol
- IF alcohol request is APPROVED, a non-IUP funded FRR must be submitted (see Accounts Payable web page for form/instructions)

Date _____

Requestor _____

Address _____

Email Address _____

Phone _____

Authorization requested for Catered Event:

Date _____ **Location** _____

Purpose / reason for event _____

Contact person _____ **Phone** _____

Indicate plan to control access to alcohol for persons attending under 21

Approved **Not Approved**

Date _____

Signature _____

Divisional Vice President or President

(Please forward Approved / Not Approved form back to Requestor)