Office of Student Engagement Hobart and William Smith Colleges

Social Event Request Form

Event Coordinator Informa	<u>ation</u>	
Event Coordinator Name:		Cell Phone:
Sponsoring Organization:		Position Title:
Campus Address:		Campus Advisor:
Email Address:		
Event Information:		
Event Name/Theme:		Event Date:
Setup Time:	Event Start Time:	Event End Time:
Types of Food & Beverages	s Provided:	
Estimated Attendance:		
Trained TIPS Monitors (#)):	
Description of Event:	Chale France After Porter	Creal Life Formal Creal Life Dorter
Philanthropy	Club Event After PartySmall/Theme House	Greek Life FormalLate Night EventOther
Event Type:		
•	ion List) Social Event (o Guest List (will only use occi	3 rd Party Caterer (please attach appropriate supporting documentation) upancy)
Alcohol: Yes Estimated No (if no, please sign)	-	(sign below after completing the TIPS section on reverse page)
Events Request Committ Fevents held during the we lam. Campus Safety may	ee. An example of this exception may be a eek (Monday, Tuesday, Wednesday, or Th walkthrough the event at anytime.	lam, regardless of the location of the event, unless a later hour is approved by the Socia in After Party at the Barn scheduled after a campus event. nursday) must end by 12 midnight. Events on Friday and Saturday evenings must end b Request forms will be reviewed in the order that they are received.
I AGREE TO ACT AS A REPRESCOMPLIANCE WITH THE CO		GANIZATION/GROUP AND WE TAKE RESPONSIBILITY FOR
Signature		Date:
Printed Name		

This form represents a request, not an approval of the event. This form must be submitted at least 5 business days prior to the event.

THIS SECTION MUST BE COMPLETED IF ALCOHOLIC BEVERAGES ARE PERMITTED AT THE EVENT Type of Service: TIPS Served Third Party_____ Source of Funding for Alcohol Amount of Alcohol: Alternative Beverages: Food/Snacks (quantity) Location of Serving Area: Organizations sponsoring an approved event with alcohol will be required to contact and secure TIPS monitors from the list of on campus trained TIPS monitors (provided on the Student Engagement website). At least 50% of the TIPS monitors for a single event must be members of the sponsoring organization. 1 TIPS monitor for 25 attendees. < 25 students = 1 TIPS monitors < 100 students = 4 TIPS monitors < 150 students = 6 TIPS monitors By signing this form, I agree to uphold the Community Standards and take responsibility for the event and the details associated with the event listed on this registration sheet. I understand that if for any reason I am requested by an HWS official to implement changes in the way the activity is conducted, I will do so immediately. I also understand that should I not make required changes or should participants not be responsive to the changes, the activity may be postponed, cancelled, or terminated. Furthermore, I will contact appropriate HWS officials if I have any policy-related concerns about the implementation of the event. If there are discrepancies between the application materials and conditions found at the event, the group, the monitors volunteering at the event, the individual(s) responsible for the event, and the executive board of the group sponsoring the event may face disciplinary proceedings. Hosting Organization's TIPS Monitors: Signature Print Clearly 1. 4. _____ Additional TIPS Monitors: Print Clearly Signature 1. 4. _____ 6. 7. 8. Trained TIPS monitors volunteering at a registered event will be required to attend a meeting the week of the event. Prior to the start of an approved social event with alcohol a walk-through of the location will be conducted with the following people: Greek Event: Campus Safety, Fraternity President, Social Chairperson, and Greek Council Representative. If the Greek Council Rep is from the hosting fraternity/sorority, another executive board member from Greek Council will participate in their place. Non-Greek Event: Campus Safety, Club/Group President, at least 3 additional representatives from hosting organization. SERF received on: ____ Office of Student Engagement Use: Signature: ____

_ Date: _____

Approval: YES NO