# Chicago-Kent College of Law 

## ILLINOIS INSTITUTE OF TECHNOLOGY

Complete this form and forward to the Administration \& Finance Office, Suite \#265. No alcohol service can occur without the completion of this form in its entirety.

## SERVICE INFORMATION

Check below the affiliation and those who will be present at the event where alcohol will be served:


| $\square$ |
| :--- |
| Students, Staff and/or Faculty |
| Other guests (please describe below) |
| Possible minors may be present |

## EVENT INFORMATION

Date $\qquad$ Time $\qquad$ Location $\qquad$ Estimated Attendance $\qquad$
Purpose of event: $\qquad$

Comments: $\qquad$

## HOST NFORMATION

Printed Name and Host Group
$\overline{\text { Signature }} \overline{\text { Email }} \overline{\text { Phone }}$

NOTE: If the host group is a student organization, a full-time IIT faculty or staff SPONSOR must be present for the duration of the time alcohol will be served.

| Print Sponsor's Name | Email | $\overline{\text { Sponsor's Signagture }}$ |
| :--- | :--- | :--- |

## PROVIDER INFORMATION and SIGNATURE

Any vendor providing alcohol service must be licensed and bonded in the State of Illinois. Caterer must sign below:


RESTRICTIONS (To be filled out by Administration \& Finance)
$\qquad$
$\qquad$

## AUTHORIZATION

