



CONNECT | ENRICH | TRANSFORM

Alcohol Use Permit

Date of Request:

Responsible Individual*:

*The responsible person must be present on all the dates and times requested on this form.

Affiliation/Institution:

Select the location and areas for which the authority is requested:

Location (Select one)	Areas being requested		
DeFelice Marine Center	Ground Level Lobby	Cafeteria	Student Lounge
Maritime Center	Lobby	2 nd Floor Commons	3 rd Floor Commons

Provide the date(s) and time(s) for which the approval is being requested. If more than one date is being requested, list each date on a separate line.

Date	Start Time	End Time

Provide a brief statement about the purpose or nature of event/occasion:

I have read and understand the rules outlined in the alcohol policy for groups at the DeFelice Marine and Maritime Center. By signing this permit request, I understand that any violation will result in losing privileges at the DeFelice Marine Center or Maritime Center.

Signature of Responsible Individual

Date

For Internal Use Only		
This request is	Approved	Denied
Approver:		Date: