

ALCOHOL APPLICATION

	Please check the applicable box. Requested event is sponsored by:	
	External Organization/Company/Individual	
	UE Department	
	Student Organization	
2.	Name of Applicant:	
	A. Campus Address of Applicant:	
	B. Home Address of Applicant:	
	C. Business Address:	
	D. Phone Numbers: Cell#Alternate #:	
	E. Business Phone#:E-mail Address:	
3.	Event Name:	
4.	Date of Event:Start Time and End Time of Event:	
5.	Event Description:	
6.	Location of Event:	
7.	Estimated Attendance: Will minors be present: _ Yes NO	
8.	Applicant chooses to have beer/wine Hosted (paid for by host), Partially Hosted (paid for by Hos dollar or consumption amount) or provide Cash Bar (paid for byguest/patron):	t up to a specifi
	Select one option: Hosted Partially Hosted Cash Bar	
wh oth	ear signage specifying that alcohol will only be served to those who present valid I.D. must be poste here alcohol is being distributed. The immediate area in front of all bars must be sectioned off her means to restrict the serving area to customers or guests only. At no time should the fro cessible to anyone under 21 years of age.	by stanchion o
ON	ICE FORM IS COMPLETED, PLEASE EMAIL TO: <u>specialevents@evansville.edu</u>	
****	<u>For University of Evansville Internal Use Only</u>	******
	Rob Shelby, Vice President, Talent & Community (Non-Student Event)	Date
		Date
		Date Date
	Rachel Carpenter, Vice President, Student Affairs (Student Event)	