



**Request for Approval to Serve Alcohol at a Campus Event**

This form serves as a request to the Division of Enterprise Risk Management for permission to serve alcohol as part of a special event. This request must be submitted to:

Amanda Alicea  
Division of Enterprise Risk Management  
Stony Brook University  
180 Administration Bldg  
Stony Brook, NY 11794  
Office: 631-632-9572  
Email: alcohol\_Request@stonybrook.edu

*This request form must be submitted no later than four (4) weeks prior to the scheduled event date. The event will not be approved unless this form is properly filled out and has all the appropriate signatures.*

**Please describe the event:**

Name of Event: \_\_\_\_\_

Sponsoring Department, Organization, etc.: \_\_\_\_\_

Location: \_\_\_\_\_ Date: \_\_\_\_\_

Time From: \_\_\_\_\_ To: \_\_\_\_\_ Estimated Attendance: \_\_\_\_\_

How is the event being advertised? \_\_\_\_\_

Are State funds being used to purchase alcohol for the event? Yes \_\_\_\_\_ No \_\_\_\_\_

What funds will be used to purchase alcohol for the event? \_\_\_\_\_

Name(s) of event coordinator(s)/manager(s) on duty during the event: \_\_\_\_\_

Who will be serving the alcohol? \_\_\_\_\_

Number of persons serving alcohol: \_\_\_\_\_ Are persons serving alcohol over 21 years of age: \_\_\_\_\_

Will all attendees at the event be 21 years or older: \_\_\_\_\_

Will alcohol be served and consumed only on the premises: \_\_\_\_\_



# Stony Brook University

Describe the procedures/safeguards that will assure that persons served are of legal drinking age (21) and do not consume excessive amounts of alcoholic beverages at the event:

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**Please describe the alcohol service proposed for this event:**

Types of alcoholic beverages being served: \_\_\_\_\_

Quantity of beverages available at the event: \_\_\_\_\_

Is alcohol available at reduced pricing? \_\_\_\_\_ Or, at no cost? \_\_\_\_\_

Who is catering food at the event? \_\_\_\_\_

Is there a charge for food and non-alcoholic beverages? \_\_\_\_\_

Describe the type and quantities of food and non-alcoholic beverages being provided: \_\_\_\_\_

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Who is catering/providing alcohol for the event? \_\_\_\_\_

Please provide a justification of reasonableness/necessity for the alcohol:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



# Stony Brook University

Individual(s) coordinating event:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Fax

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name

\_\_\_\_\_  
Fax

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**FOR ENTERPRISE RISK MANAGEMENT USE ONLY:**

Date Received: \_\_\_\_\_

\_\_\_\_\_Approved

\_\_\_\_\_Not Approved

Vice President for ERM (designee)

Date

Comments:

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