



Campus Events Alcohol Request Form

Please answer all questions completely before submitting your request. Request must be submitted 3-4 weeks prior to the event date. Requests received at a later date may not be approved.

Name: _____

Event Name: _____

Brief Description: _____

Reservation Number: _____

Event Location: _____ Event Date: _____

Event Start Time: _____ Event End Time: _____

Number of KSU Attendees: _____ Number of Guests (non-KSU): _____

Affiliation of non-KSU Guests: _____

Please indicate the types of alcohol you plan on having:

Beer

Wine

- **I will attest that no guests under the age of 21 will be in attendance.**
- **A licensed bartender is required at the Host's expense.**
- **A campus police officer will be required to be in attendance at the Host's expense.**
- **Event Host is required to comply with all of Kennesaw State University's alcohol policy requirements and the State of Georgia laws.**

Please sign this form and submit the completed version to events@kennesaw.edu. By providing your signature, you are confirming all of the above information is true and accurate.

Applicant Signature

Date

Approval/Denial

Your request has been:

Approved

Denied

Authorized Signature

Date

*State funds cannot be used for reimbursement of alcohol purchases.