



REQUEST FOR USE OF UNIVERSITY FACILITIES

University of Pittsburgh
 Procedure 04-01-01

Confirmation Reference # _____

Note that a separate form must be completed for each type of request and when the name of the University of Pittsburgh Sponsor changes. The University reserves the right to limit the amount of space per event and determine the security needs. Please print or type.

If multiple sites are requested, please list and state date of each event.

Date of Request: _____
 Date(s) of Event: _____

University Facility or Facilities Requested and Room #s (if known):

Number of Seats in Each Room Requested: _____

Event Start Time: _____ AM PM Event End Time: _____ AM PM

Set Up Time: _____ AM PM Take Down Time: _____ AM PM

If additional space is needed, please attach a separate list of details.

Completed request must be received by the appropriate reservation center at least 2 weeks prior to event.

Requestor's Name (Print): _____ Signature: _____

Address: _____

Telephone: _____ Fax: _____ Email: _____

University Sponsor's Name (Print): _____ Title: _____

Campus Address: _____

Campus Telephone: _____ Fax: _____ Email: _____

Affiliation (check one): Faculty Staff Department: _____

University Account Number: **(All sponsored Non-University groups must use Subcode 4910.)**

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Signature of University Sponsor: _____

If academic department, signature of *Department Chair* or *Dean* is required. If administrative department, signature of *Responsibility Center Head* is required.

Signature of Senior Administrator: _____

For official user only: Approved Approved with exception(s) noted below Not Approved

Exception(s): _____ **Amount to be Charged** _____

Signature: _____ Date: _____

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Nature of Event: Concert Reception Dance Lecture Film Meeting
 Other Specify: _____

Brief explanation of event: _____

Who is the speaker? _____

How many are estimated to attend? _____

Is admission being charged or is anything being sold? Yes No

Will food or beverage be served? Yes No Food is not permitted in classrooms.

Will there be entertainment? Yes No

Are special services requested? Yes No If yes, please see contact phone listing on Page 3.

Media needs? Yes No If yes, specify _____

Please check those in attendance:

- | | | |
|---|---|--|
| <input type="checkbox"/> University Administration | <input type="checkbox"/> University Faculty | <input type="checkbox"/> University Staff |
| <input type="checkbox"/> University Students | <input type="checkbox"/> Alumni | <input type="checkbox"/> University Donors |
| <input type="checkbox"/> University Group | Name of group: _____ | |
| <input type="checkbox"/> News Media | | |
| <input type="checkbox"/> Non-University Group (Go to Section 1) | | |
| <input type="checkbox"/> Other Specify: _____ | | |

Section 1 (MUST BE COMPLETED IF SPACE IS BEING REQUESTED FOR A NON-UNIVERSITY GROUP)

Name of group: _____

Is this a non-profit organization? Yes (Must be able to provide proof) No

What is the purpose for requesting a University of Pittsburgh facility?

Has this organization held an event previously at the University of Pittsburgh? Yes No

If "yes", please state when. _____

Insurance Requirements for Non-University Groups:

Workers' Compensation: Statutory

Employer's Liability: \$100,000 each accident, \$500,000 disease-policy limit, \$100,000 disease-each employee
Comprehensive General Liability, including but not limited to contractual, products. Broad form property damage,
personal injury, host liquor and independent contractors liability \$1,000,000 combined single limit for bodily injury
and property damage per occurrence.

OR

Commercial General Liability: \$1,000,000 each occurrence

\$2,000,000 general aggregate

\$1,000,000 products/completed operations

\$1,000,000 personal and advertising injury

\$50,000 fire damage (any fire)

\$5,000 medical expense (any one person)

Automobile Liability: including hired car and non-owned automobile \$1,000,000 combined single limit for bodily
injury and property damage per accident.

Questions may be directed to the Office of Risk Management & Insurance 412-624-0621.

Fees for Non-University Groups

Requestors will be notified of the University's decision to permit the extracurricular use of the University facilities.

- A fee for the use of the room or area is charged for use by non-university groups. **This form and your payment should be submitted to the University Sponsor.** Payment made payable to the *University of Pittsburgh* must accompany each request for use of a University facility. The fees are as follows:
 \$50.00 - Classroom space up to 100 seats. Fee assessed per classroom per day.
 \$100.00 – Classroom space over 100 seats. Fee assessed per classroom per day.
 \$250.00 – Other special areas assess a fee that provides for access to the facility for up to three hours.
 (If application is not approved, the fee will be returned.)
Exempt from the fee are certified student groups and recognized academic functions.
- Additional fees for services, security and damages will be charged where applicable.
- You may obtain a copy of University of Pittsburgh Policy 04-01-01, Extracurricular Use of University Facilities, on-line at <http://www.bc.pitt.edu/policies/policy/04/04-01-01.html>.
- All fees will be billed to the University account number of the Department Sponsor.
- No refunds for cancellations.

IMPORTANT: PLEASE READ AND SIGN BELOW

I understand that filing this application does not obligate the University of Pittsburgh in any way. I understand that the information is the property of the University. I certify that the information contained in this application and supplemental materials is complete, truthful, and accurate to the best of my knowledge.

- **The approved form is authorization to use the requested space. It is necessary to have the form in your possession at the event. The form is not valid without the authorized signatures.**
- **Sponsor must attend event. In the case of multiple sites, a sponsor must be present at each site.**
- **It is understood that the University will require reimbursement for any additional maintenance and security cost, and/or any damages incidental to the additional use. The account of the sponsoring department will be charged accordingly.**

Requestor's Signature _____

Date _____

Confirmation Reference # _____

Department Sponsor please forward to the appropriate Reservation Center:

Office of the University Registrar
 220 Thackeray Hall
 Pittsburgh, PA 15260
 412-624-7640 or 412-624-7641, Fax: 412-624-7603

Office of Special Events
 1200 Bruce Hall
 Pittsburgh, PA 15260
 412-624-7100, Fax: 412-648-1497

Office of the Executive Vice Chancellor
 124 Cathedral of Learning
 Pittsburgh, PA 15260
 412-624-4247, Fax: 412-624-5000

William Pitt Union
 M2 WPU
 Pittsburgh, PA 15260
 412-648-7817, Fax: 412-624-4011

University Catering Must Be Used For All Food and Beverages. Food and beverages not permitted in classrooms.

Please initiate contracts with any of the following special services if needed for your event:

Department of Parking, Transportation, & Services	412-624-8877
Disability Resources & Services	412-648-7890
Facilities Management (Furniture, Tables & Chairs)	412-624-8809
Media Services for classrooms (Center for Instructional Development & Distance Education)	412-648-7240
Media Services for Scaife Hall classrooms (UPMC Medical Media Services)	412-647-5050
Media Services for William Pitt Union rooms (Technical Services)	412-648-7821
University Catering	412-648-2302
University Police	412-624-4043 or 412-624-2121