

ALCOHOL PERMIT APPLICATION

1. Tit	le of Event			
2. Sp	ecific Location			
3. Da	ate of Event		4. Day of Week	
5. *S	tart Time		_ End Time	
*F	or internal programs, start time must be	gin after clo	se of College business hours.	
6. Sp	oonsor			
7. Nu	umber of guests anticipated: RCNJ Faci	ulty/Staff	RCNJ Students Othe	ers
. Alc	coholic Beverage(s) to be served			
			and served	
0. No	on-alcoholic beverage(s) to be served (re	equired)		
	ood being served (required)			
2. Ar	e guests buying a ticket in advance or a	t door? Yes	No 13. Cash Bar? Yes	No
4. Na	ame of Person Responsible			
	knowledgements			
. Ia htt	cessive amount of alcoholic beverages. cknowledge that I am aware of and have rea ps://www.ramapo.edu/student-conduct/files/ inderstand that alcohol may not be served	2017/07/ALC	COHOL-AND-OTHER-DRUG-POLICY.pdf	
Nai	me of Requestor (Print)		Sponsoring Division or Academic Scho	ol
Sig	nature of Requestor	Date	Signature of Dean (if faculty requestor)	Date
	plete & email form to <u>volshefs@rama</u>	i <u>po.ed</u> u or	drop off to D211 two weeks in advanc	
	Official Purpose Only		Permit Number	
	Official Purpose Only		Permit Number	.e.
	Official Purpose Only		Permit Number	
Sigi				
Sigi <u>Noti</u>	nature of Authorized Official		Date Issued	
Sigi <u>Noti</u> Dinii	nature of Authorized Official		Date Issued Bartender Provided by	

All those completing an Alcohol Permit Application must review the Ramapo Alcohol and Other Drug Policy at: https://www.ramapo.edu/student-conduct/student-handbook/alcohol-and-other-drug-policy-2/