

ALCOHOL APPROVAL FORM

In compliance with the University [Alcohol Policy](#), this form must be completed for all university events at which alcohol will be served, whether the event is held on or off WMU property. Authorization to serve alcohol and to expend University funds for the purchase of alcohol must be obtained **before** an event may take place. Please allow ample time to obtain the necessary signatures.

Contact Name _____ Email _____

Host Department _____

Event Location _____

Event date _____ Time: Begins _____ Ends _____

University purpose _____

Is any fee charged to attend: yes ____ no ____ If yes, amount per person _____

Cash bar yes ____ no ____

Approximate # of attendees _____

List beverage(s) to be served _____

Funding source (May **NEVER** be fund 11, 25-30) _____

Who will be serving the alcohol _____ [TIPS](#) trained yes ____ no ____

By signing below, you affirm that you have reviewed the [Alcohol Policy](#) and will comply with all policy requirements.

Applicant Name _____ Signature _____

App Supervisor Name _____ App Supervisor Signature _____

Applicant Date _____ Supervisor Date _____

*****VP signature only required if event begins before 5:00 p.m. M-F*****

VP Name _____ VP Signature _____

Date _____

Email completed form to michele.cole@wmich.edu

Risk Manager Name Michele Cole Signature _____

Date _____