

OFFICE OF EVENTS AND CONFERENCES
505 Ramapo Valley Road, Mahwah, NJ 07430-1680
Phone (201) 684-7590 Fax (201) 684-7097
www.ramapo.edu

ALCOHOL PERMIT APPLICATION

. Title of Event			
. Specific Location			
		4. Day of Week	
		End Time	
*For internal programs, start time m			
Sponsor			
Number of guests anticipated: RCN	NJ Faculty/Staff_	RCNJ Students Other	ers
Alcoholic Beverage(s) to be served			
Total quantity of alcoholic beverage	to be purchased	d and served	
. Non-alcoholic beverage(s) to be set	ved (required)_		
. Food being served (required)			
		es No 13. Cash Bar? Yes	No
. Name of Person Responsible			
Department/Office			
		I	
. Name of Server/Bartender			
Acknowledgements			
	ct/files/2017/07/A	LCOHOL-AND-OTHER-DRUG-POLICY.pdf NCJ business hours for internal programs.	
Name of Requestor (Print)		Sponsoring Division or Academic Scho	
			ol
Signature of Requestor	 Date	Signature of Dean (if faculty requestor)	ol ————————————————————————————————————
Complete & email form to volshefs		or drop off to D211 two weeks in advance	Date
		-	Date
Complete & email form to volshefs		or drop off to D211 two weeks in advance	Date
Complete & email form to volshefs For Official Purpose Only Signature of Authorized Official		or drop off to D211 two weeks in advance Permit Number	Date
Complete & email form to volshefs For Official Purpose Only Signature of Authorized Official Notification		Permit Number Date Issued	Date
Complete & email form to volshefs		Permit Number Date Issued Bartender Provided by	Date

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/