

**ALCOHOLIC BEVERAGE AND REIMBURSEMENT PRE-APPROVAL REQUEST FORM**  
**Lawrence and Edwards Campuses, University of Kansas**

**FROM:** \_\_\_\_\_ Phone #: \_\_\_\_\_  
(KU unit/organization contact person's name)

**EVENT DETAILS:**

1. Sponsoring University unit/organization: \_\_\_\_\_
2. Date of event: \_\_\_\_\_ Day of week: \_\_\_\_\_ Time of event: \_\_\_\_\_
3. Purpose of event (include specific information about how it relates to official University business and/or fundraising): \_\_\_\_\_
4. Location, including room #: \_\_\_\_\_
5. Expected attendance: Number: \_\_\_\_\_ Groups (circle all that apply): faculty, staff, students, spouses, public, other (please list): \_\_\_\_\_

**PART A: ALCOHOLIC BEVERAGE REQUEST:  Yes  No (If no, skip this section and complete back.)**

Approval required pursuant to the policy on [Alcoholic Liquor at University Events](#).

6. Alcoholic beverage(s) to be served: \_\_\_\_\_
7. Other beverage(s) to be served: \_\_\_\_\_
8. Time of beverage service: \_\_\_\_\_
9. Will undergraduate students be present at this event? No Yes  
(Alcoholic beverage service normally will not be approved if undergraduate students are in attendance.)
10. Should the Public Safety Office be notified of this event? No Yes  
If yes, please give reason: \_\_\_\_\_
11. Signature of the person responsible for enforcing the following requirements:
  - a. That no alcoholic beverages other than those served by the staff of the Kansas Union will enter the designated area;
  - b. That no alcoholic beverages are carried outside the area designated for beverage service.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

**PART B: REIMBURSEMENT PRE-APPROVAL REQUEST (for events that require pre-approval for reimbursement)**

School and departmental events that fall outside those described as “regular” events with a clear business purpose, as articulated in the policy on [Reimbursement of Entertainment Expenses](#), must receive preapproval from the Provost or designee. If this event requires pre-approval for reimbursement of expenses, click “yes” below:

Pre-approval for reimbursement requested:  YES

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**APPROVAL SIGNATURES:**

**FOR ALCOHOL REQUESTS** – collect signatures I, II, and IV, and V if applicable

**FOR REIMBURSEMENT PRE-APPROVALS** – collect signature III

**FOR ALCOHOL REQUEST AND REIMBURSEMENT PRE-APPROVAL** – collect I-IV, and V if applicable

I. Acknowledged:

\_\_\_\_\_  
Name and title of person responsible for approving the location named above

\_\_\_\_\_  
Date

II. Acknowledged (Lawrence Campus) or name of licensed caterer (Edwards Campus):

\_\_\_\_\_  
David Mucci, Director, KU Memorial Unions

\_\_\_\_\_  
Date

III. Reimbursement Pre-Approval:

\_\_\_\_\_  
Vice Provost for Administration & Finance, or designee

\_\_\_\_\_  
Date

IV. Approved/Recommended:

\_\_\_\_\_  
Sara Rosen, Interim Provost and Executive Vice Chancellor; or designee

\_\_\_\_\_  
Date

V. Approved (required only for campus-wide and athletic events):

\_\_\_\_\_  
Bernadette Gray-Little, Chancellor; or designee

\_\_\_\_\_  
Date