

## Concordia PRIOR APPROVAL FORM FOR CATERING & ALCOHOL

| FINANCIAL SERVICES   | Date received by Financial del Fields |
|--|---------------------------------------|
| Section I: Basic Information   |                                       |
| Name of Requester:   | Phone Extension:                      |
| Internal mailing address:  | E-mail Address:                       |
| Requesting Department:   |                                       |
| Section 2: Event Information   |                                       |
| Which type of prior approval is required?  |                                       |
| Option 1: Internal event where alcohol is being served   | Event Name:                           |
| Option 2: Activity off campus with more than 6 internal participants   | Event Date:                           |
| Option 3: The catering invoice is over \$5,000   | Number of individuals in attendance:  |
| Purpose of event / activity  | Number of individuals in attendance.  |
|  |                                       |
| Section 3: Budget Estimation (Catering / Alcohol only)   |                                       |
| Budget Cost Inclusions:  |                                       |
| Full cost of meals, including the cost of alcohol and the required permits to serve drinks   |                                       |
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| Total Estimated Budget   |                                       |
| Note: n general, academic and research conferences are not considered to be a Hospitality Event. Only the hospitality related expenses of the conference |                                       |
| (i.e. meals, refreshments and alcohol) are intended to be included.  |                                       |
|  |                                       |
| Section 4: Instructions for approval   |                                       |
| I. If you selected option I and/or 2 in Section 2 above, please have this form approved your Dean or Administrative Unit Head as applicable              |                                       |
| 2. If you selected option 3 in section 2 above, please have this form approved by a member of the University's Senior Administration                     |                                       |
| Name of Approver:  |                                       |
| Traine Stryppioret.  |                                       |
| Position title:  |                                       |
| . 55.55.1 3000   |                                       |
| Signature:   |                                       |
| Signature.   |                                       |
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## **Section 5: Form submission**

- ✓ Booking your event and/or alcohol order through Hospitality / Conference Services? → Send this approved form by email to your event coordinator
- ✓ Paying for food/alcohol expenses on your corporate card? → Include this approved form with your related Expense
- ✓ Using the University's WebRequisition system? → Include this approved form as an attachment to the related WebRequisition