

**SOUTHERN CONNECTICUT STATE UNIVERSITY  
ALCOHOL POLICY PROCEDURE**

1. If the requestor at the time of completing a "Reservation Form" indicates that it wishes to make alcoholic beverages available at an on-campus event, the Alcohol Policy Addendum form must also be completed and returned to the designated risk manager.
  - A. Sale of alcoholic beverages on University premises is prohibited.
  - B. If alcohol is served, the Alcohol Policy Addendum must then be forwarded to the designated risk manager. After their review, the form is forwarded to the Vice President for Student Affairs.
    1. When the event is designated as University sponsored, the group representative(s) must meet with the University Food Service provider to arrange for the beverages. If the campus group or department does not wish to use the University Food Service provider for food, they still must use them for the alcohol portion of the event.
    2. When the event is not designated as sponsored by the University, the group representative(s) shall be required to hire the University Food Service for any alcohol be served.
2. All requests must be submitted and forwarded to the Vice President for Student Affairs at least four (4) weeks prior to the event.
3. The Vice President for Student Affairs, in consultation with the President, will evaluate the request and inform the user of the decision.

**SOUTHERN CONNECTICUT STATE UNIVERSITY  
ALCOHOL POLICY ADDENDUM FOR ON-CAMPUS EVENTS**

Name of Sponsoring Group \_\_\_\_\_

Name of Presenter \_\_\_\_\_ Position \_\_\_\_\_

Local Address \_\_\_\_\_

Local Telephone \_\_\_\_\_

Name of Adviser (for student groups) \_\_\_\_\_

Local Address \_\_\_\_\_

Type of Event \_\_\_\_\_

Date of Event \_\_\_\_\_ Time of Event \_\_\_\_\_

Location of Event \_\_\_\_\_

Anticipated Attendance at Event \_\_\_\_\_

Will this event be an **Open Event** (includes persons under the legal drinking age) \_\_\_\_\_

Manner in which alcoholic beverages will be made available, identification will be checked, and consumption will be monitored.

\_\_\_\_\_  
\_\_\_\_\_

Type and quantity of food to be served

\_\_\_\_\_

Type of alcoholic beverages to be served

\_\_\_\_\_

I (we) the undersigned, understand State law and the aforementioned University regulations pertaining to the sale, consumption and possession of alcoholic beverages and accept full responsibility for the actions of those in attendance. Further, it is understood that I (we) assume all legal responsibility and personal liability for failure to comply with applicable State Law and these University regulations. I (we) agree all arrangements for any alcoholic beverages will be done so through the University dining services.

\_\_\_\_\_  
Signature of Presenter

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Faculty Advisor (when applicable)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Dining Services

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Vice President for Student Affairs

\_\_\_\_\_  
Date