

MARSHALL UNIVERSITY

REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # _____

CONTACT PERSON _____

TELEPHONE NUMBER _____

FUNCTION SPONSOR _____

LOCATION OF FUNCTION _____

DATE(S) OF FUNCTION _____

PURPOSE/JUSTIFICATION OF FUNCTION:

VENDOR NAME **: _____

ENCUMBRANCE / P.O.# (if applicable) _____

**Sodexo America LLC is the sole food service provider for all Main MU Campus events unless an exception is requested and approved by the Sr. Vice President for Operations/Chief of Staff.

Signed _____ Date _____

APPROVED ☐ DENIED ☐

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ _____

MEETING ROOM \$ _____

EQUIPMENT RENTAL \$ _____

TOTAL \$ _____

AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____

FUNCTION SPONSOR SIGNATURE

DATE

By: _____

DEAN/DIRECTOR/CHAIR SIGNATURE

DATE

MARSHALL UNIVERSITY

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PURPOSE – JUSTIFICATION Examples

Examples include, but are not limited to:

Permissible events include	Non permissible events include
Non-routine event hosted by a department and specifically planned such as: • Conference participants • University standing committee participants • Seminar /Workshop/Training Participants – Non-Reoccurring	Group entertainment/events such as: • Routine Training Events • Employee Recognition / Awards • Holiday /Going Away /Birthday /Promotion Parties • Baby Showers/Retirement Parties/Anniversaries • Tailgate Parties • Regular classroom sessions • Spending Unit meetings
Applicant/Candidate meetings	
Consultant/ Vendor meetings for non-routine business purposes	
Student Activities / Orientation / Counseling or Mentoring Sessions	Emergency shall not be used for hardship resulting from neglect, poor planning, or lack of organization.
University Declared Emergencies where employees must work outside the normal operating hours and food must be brought in	

MARSHALL UNIVERSITY
Hospitality Event Attendee Sign-in Sheet

FUNCTION ATTENDEES
List the attendees 901 ID#s, when applicable; names, and affiliation.

#	901#	Name	Affiliation
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