



**REQUEST FOR EVENT SECURITY PERSONNEL FORM**  
 SD406-0401 (10/31/16)

PERSONNEL REQUESTED BY

Organization/Department: \_\_\_\_\_

Person Making Request: \_\_\_\_\_ Phone #: \_\_\_\_\_

Event Manager: \_\_\_\_\_ Phone #: \_\_\_\_\_

Invoice Address: \_\_\_\_\_

EVENT INFORMATION

Type of Event: \_\_\_\_\_ Name of Event: \_\_\_\_\_

Event Location: \_\_\_\_\_

Date of Event: \_\_\_\_\_ Time Event Starts: \_\_\_\_\_ Time Event Ends: \_\_\_\_\_

Estimated Attendance: \_\_\_\_\_ Time Doors Open: \_\_\_\_\_ Alcohol Served? \_\_\_\_\_

Contact Person During Event: \_\_\_\_\_ Contact Persons Phone # \_\_\_\_\_

Number of Officers Needed: \_\_\_\_\_ Times Officers Needed: \_\_\_\_\_ to \_\_\_\_\_

AGREEMENT

There is a four (4) hour minimum for university and/or private security event services. There may also be a requirement for a supervisor depending on the amount of officers needed. Event managers will be advised of the hourly rates for security services once a request has been submitted. A request must be made at least fifteen (15) days before the event, thirty (30) days preferred. A cancellation must be made at least twenty-four (24) hours before the event. Failure to cancel security services as stated will result in the responsible party being charged in full for the services requested. The balance is due in full upon receipt of the invoice and is the responsibility of the Event Manager whose signature appears below.

Event Manager Signature: \_\_\_\_\_ Date: \_\_\_\_\_

DEPARTMENT USE ONLY		
Received By: _____	Date: _____	Time: _____
Private Security Company Contacted: _____		
Date Contacted: _____	Time Contacted: _____	Number of Officers Assigned: _____
Campus Security Action:    Approved _____    Disapproved _____    Pending Approval _____		
Campus Location Concerned: _____		