



Texas A&M University-Commerce for **RAYBURN STUDENT CENTER** Events

Food Waiver Request Form

Sodexo is currently the food service provider for the university. Contractually Sodexo has exclusive serving rights in the Rayburn Student Center. An approved food waiver is required for any food or beverage items related to catering or any other food event located at the Rayburn Student Center. Requests should be submitted **10 business days prior to the event date** for consideration.

(check please)

- Yes, Copy of an approved Event/Travel Risk Assessment Form (Dept of Safety and Risk Management)
- Yes, RSC room reservation has been completed
- Yes, Food Permit and Insurance are provided

Waiver requests may be submitted to: LionCard@tamuc.edu ***If approved, the Food Waiver must be displayed at the event.***

Reason for Waiver Request, check appropriate box:

- Fundraiser
- Special Menu
- Organizational Meeting
- Other, _____

Event Name/Description: _____ Event Date: _____

Event Location: (room/area in which food will be served) _____

Organization: _____

Contact Person: _____ Cell Phone: _____

E-Mail: _____

Additional Information (In email, answer the following questions)

- Timeframe food will be served and who will be serving the food?
- Estimated number of people who will be served or in attendance?
- Describe the guests? (students, faculty/staff, student organization, general public, other)
- Who is hosting or funding the event?
- Where is food being prepared or obtained? (provide name and address)
- How will food be delivered?
- Does the food provider have a food handling permit, food server training, etc.?
- How will food be kept hot or cold to maintain safety requirements?
- List or attach menu of food and / or beverages to be served, include amounts, brands or catering proposal.
- Have you visited with the campus food service provider, Sodexo?
- What is your budget per person for this event?

Signature: _____ Date: _____

For Office Use Only

Received By: _____ Date/Time Received: _____

Manager & Records Retention Officer Auxiliary Services Yes No Signature: _____ Date: _____

Dean of Students Yes No Signature: _____ Date: _____

Explanation if needed: _____