

Jefferson County Schools BUILDING USE REQUEST FORM

◆ *Instructions: Applicant shall complete #1 through #12. Please print. Submit application only to school principal 10 working days before the event. Please press firmly. Retain attachments for your records.*

1. Building requested: _____

2. Area of school building needed: (Please mark with an "X")
- | | | |
|--------------------|---|------------------------------|
| _____ A. Gym | _____ E. Family and Consumer Sciences Lab | _____ I. General Classroom |
| _____ B. Cafeteria | _____ F. Auditorium | _____ J. Kitchen |
| _____ C. Library | _____ G. Business Classroom | _____ K. Lobby and Hall area |
| _____ D. Shop | _____ H. Science Lab | _____ L. _____ Field |

3. Day or days of the week needed: (Please mark an "X" above day(s) requested)

Designate a.m. or p.m.	_____ Sunday*	_____ Monday	_____ Tuesday	_____ Wednesday	_____ Thursday	_____ Friday	_____ Saturday
Beginning Time							
Ending Time							

4. Date or dates needed: From: _____ To: _____ Number of weeks needed: _____

5. Special requests (i.e., auditorium/field lighting, kitchen equipment): _____

6. Kind of activity or reason for request: _____

7. Name of organization making request: _____

8. Name of official or individual making request: _____

9. Mailing address of organization/individual making request: _____

10. Is this a school related group or community/civic group: _____

If fees are required for personnel see payment chart SOP 5.2a If fees are required for facility usage see payment chart SOP 5.2a

Contact persons phone number: _____ Contact persons e-mail: _____

11. I have been provided copies of the Jefferson County Board of Education Tobacco Control Policy; Racial, Sexual, Religious/Ethnic Harassment and Violence Policy; and Guidelines for Use of Facilities in Jefferson County Schools. I have read and understood these regulations, and I further understand that the failure of my group, club, or organization to abide by these rules and regulations will be grounds for the revocation of the privilege of using Jefferson County Schools' facilities and/or grounds. *Retain attachments for your records.*

12. Signature and date of request: _____
Signature Date

Approval: (Signatures to be completed by school officials)

A. Signature of School Principal**: _____

_____ Recommended _____ Not Recommended Date: _____

B. Signature of Board of Education Official**: _____

_____ Request Granted _____ Request Not Granted Date: _____

*School facilities may not be used before 2:00 PM on Sundays.
 **Conditions or comments: _____

◆ Your organization will be billed for the following fees. Do not pay staff on-site. Principal must complete this section.

Custodian Required - \$30/hour	_____ hours x \$30 = _____	
Cook Required - \$30/hour	_____ hours x \$30 = _____	
Technical Support Staff Required - \$30/hour	_____ hours x \$30 = _____	lighting - \$12.00/hour used = _____
Supervisor - \$30/hour	_____ hours x \$30 = _____	
Facility usage fee - (see chart SOP 5.2a)	_____ = _____	

- ◆ Certificate of Liability Insurance must accompany request. Requests without certificate will not be granted.
- ◆ All scheduled activities are cancelled when schools are closed for inclement weather or for a school holiday.