

Columbus, OH 43210

Electronically: dining@osu.edu



DONATION REQUEST FORM

Registered student organizations that would like to request a donation of food for any event from Dining Services must return this completed form AT LEAST 30 days prior to the event to be considered. We can only consider requests submitted on this form - we cannot handle solicitations at our locations or by phone.

Due to the volume of requests we receive, we are unable to guarantee donations will be made, even for events that have been supported in previous years. Groups will be informed within two weeks whether request was accepted or denied.

TODAY'S DATE			/ /	
CONTACT INFORMATION				
REGISTERED STUDENT ORGANIZ	ATION NAME			
CONTACT PERSON				
TITLE OR RELATIONSHIP TO ORG				
EMAIL	PHONE	ALTERNATIVE PHONE		
EVENT INFORMATION (MUST B	e at least 30 days from	TODAYS DATE)		
NAME / TITLE OF EVENT		EXPECTED ATTENDANC	Е	
DATE / / TIME :				
LOCATION (BUILDING) / PLACE	OF EVENT			
PURPOSE OF EVENT				
HOW WILL DONATION BE USED? HOW WILL THIS BENEFIT OSU STUDENTS?				
HOW WILL THIS BENEFIT USU S	TODEN 13:			
TYPE OF DONATION REQUE	ST (PLEASE INCLUDE SPECI	FICS / QUANTITY DESIRED)		
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REFRESHMENTS SNACKS				
AUCTION ITEM / DOOR PRIZE				
MEALS				
	VED A DONATION IN T	THE PAST? YES NO		
HAS THIS ORGANIZATION RECEIVED A DONATION IN THE PAST? YES NO IF YES, WHEN AND WHAT?				
Please return completed application to	n:			
In-Person: The Office of Student Life - Dining Services, 450 Lincoln Tower, 1800 Cannon Drive,				