

# **REQUEST FOR WAIVER OF CATERING EXCLUSIVITY**

**No consideration will be given to events that are scheduled to occur less than 14 days from the receipt of this form.**

## **POLICY**

Creighton University contracts its food service through Sodexo Campus Services (also known as University Dining Services - UDS). All food and beverage sold on campus must be purchased from University Dining Services. A space reservation acts as a clearance for a food event to take place and should be made prior to placing a catering order or requesting a catering waiver.

The University recognizes the importance of food menus to the success of certain educational and culturally diverse programs. Therefore, in the following cases the sponsoring registered organization or university department **MAY** be eligible for a waiver of catering exclusivity:

- Ethnic food banquets when UDS is not capable of providing authentic ethnic foods.
- Fundraisers (only registered student organizations are eligible)
- Promotional activities (only registered student organizations are eligible)

## **PROCEDURES FOR REQUESTING A WAIVER**

The requesting organization/department must complete the Waiver of Exclusivity form and turn it into the Director of the Skutt and Harper Centers. A meeting to discuss the request may be made by the Director. If a meeting is requested, a waiver will not be considered unless this meeting takes place.

The requesting organization/department is responsible for submitting the request to the Director of the Skutt and Harper Centers. Requests are to be turned in to the administrative office in the Skutt Student Center, room 200 or emailed to [reservations@creighton.edu](mailto:reservations@creighton.edu).

## **ADDITIONAL INFORMATION**

If the request to use an external caterer is approved the following information from the approved caterer must be submitted to the Skutt Student Center, Room 200 at least five business days prior to the scheduled event. Failure to submit the appropriate documentation will result in the withdrawal of the approval of the event:

- Insurance Certificate
- Douglas County Health Certificate/Food Permit

**When not using University Dining Service (Sodexo Catering) as the food provider for an event, the requesting organization/department is responsible for providing all supplies and for cleaning the area after the event.**

**The student organization/department is required to follow the University's food handling guidelines. The guidelines are available at:**

<http://www.creighton.edu/studentlife/studentactivitiesoffice/studentorganizations/policies/>

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**Any event with alcoholic beverages available is required to have University Dining Services cater the event. (See Alcohol Policy listed in the Centralized Reservations Policy and Event Guide)  
Submitting a waiver does not imply approval. Only upon receiving written notice of approval may a requester proceed with an event using an external caterer.**

Questions may be directed to the Centralized Reservations Offices by emailing [reservations@creighton.edu](mailto:reservations@creighton.edu) or by calling of the office numbers listed below:

- Skutt Student Center Location: (402) 280-1706
- Harper Center Location: (402) 208-1493

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## Application

Today's Date: \_\_\_\_\_

### Contact Information

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

Individual Applying for Request: \_\_\_\_\_

Campus/City Address: \_\_\_\_\_

Campus Phone Number: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name of Organization Advisor/Dept. Head: \_\_\_\_\_

Campus Address: \_\_\_\_\_

Campus Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

### Event Information

Event Title: \_\_\_\_\_

Event Date: \_\_\_\_\_ Event Time: From \_\_\_\_\_ to \_\_\_\_\_

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

This event is a request for (check all that apply):

Kitchen Access

Student Prepared Food

Off-campus Vendor Prepared Food

Donated Food (Student Organization events eligible)

Fundraiser (Student Organizations ONLY)

**\*Form required from Student Activities before Waiver Request can be processed)**

Promotional Activity (Student Organizations ONLY)

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**Specific Food Item(s) to be Served (be as detailed as possible, use additional paper if necessary):**

**Rationale for Waiver Request (be specific and use additional paper if necessary):**

**Food Prepared by Off-campus Vendor (complete if applies):**

Vendor Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Legal Documentation Required**

- Proof of Insurance
- Proof of Douglas County Health Certificate / Food Permit

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**Food Prepared by Student Organization (check all that apply):**

Prepared off-campus and brought to campus

Specific Location: \_\_\_\_\_

Prepared on-campus

Specific Location: \_\_\_\_\_

**I have read and understand the Request for Waiver of Catering Exclusivity Policy.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**SUBMIT FORM**

**Internal Use ONLY**

Date Received \_\_\_\_\_

Approved

Denied

Legal Documents Received?

Director of Skutt/Harper Centers Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Copies to sent to:

Client

Facility manager where event will be held

University Dining Services (Sodexo Catering)

Other