



Student Organizations

Short-Term Vending / Fundraising Application

PLEASE READ CAREFULLY AND COMPLETE. ALL REQUEST MUST BE SUBMITTED (10) WORKING DAYS IN ADVANCE OF THE EVENT.

Name of Student Organization _____		
Name of Applicant _____		Office Held in Organization (Pres., VP, Treas.) _____
Phone Number _____	Email _____	
Description of Planned Activity _____		
Requested Date(s) and Time(s): Vending/Fundraising is limited to a maximum of 10 days per semester		
(1) _____ , _____ Date Time	(2) _____ , _____ Date Time	(3) _____ , _____ Date Time
(4) _____ , _____ Date Time	(5) _____ , _____ Date Time	(6) _____ , _____ Date Time
(7) _____ , _____ Date Time	(8) _____ , _____ Date Time	(9) _____ , _____ Date Time
	(10) _____ , _____ Date Time	
***** APPLICANT MUST RECEIVE THE FOLLOWING SIGNATURES/APPROVALS *****		
1) Faculty Advisor: _____	Signature _____	Email/Phone _____
2) Student Activities: Must Receive Approval via Bison Link		
3) Central Scheduling: Must Submit Table Request via EMS and Receive Approval	(Vending/Fundraising is ONLY allowed in Blackburn)	
 Howard University has an exclusive beverage agreement with the Pepsi-Cola Company. All beverages promoted or distributed on campus must be Pepsi-Cola brand products. Only non-perishable, manufacturer pre-packaged food items may be offered by student organizations.		
 The applicant, on behalf of the officers of the above referenced organization, represents that they are familiar with and will comply with all University regulations and rules applicable to activities it will perform under this permit, including without limitation the most current Howard University Short Term Vending Regulations (available in the Student Activities Office and the Office of Auxiliary Enterprises). Failure to comply with applicable regulations and rules may subject the student organization to termination of current vending privileges, denial of future vending privileges, and such other liabilities and consequences as may be appropriate under the law and University policies.		
Applicant Print Name _____	Signature _____	Date _____

Return Form to:
Office of Auxiliary Enterprises
2244 10th Street, NW – Suite 219

Email Form to:
auxiliary@howard.edu

For Official Use Only

APPROVED

NOT APPROVED