FRATERNITY/SORORITY HOUSE MODIFICATION FORM

Event Modification Approval
Fraternity and Sororities that are hosting events at the fraternity or sorority house that will build items adjacent to the house, pierce the grounds, including pools with water, sand, walls or fencing, need to fill out the Fraternity/Sorority House Modification form and submit to Facility Services (at least 10 working days in advance of the event). The purpose of this form is to indicate if Facility Services needs to approve the set-up of the event prior to the event being held.

Event Information
Name of Fraternity/Sorority: ______________________________________________________
Title of Event: ___________________________ Day and Date(s) of Event: ___________________________
Location of Event: ___________________________ Start Time: _____ am/pm End Time: _____ am/pm
Set up beginning date:___________________ Will you be piercing the ground with any objects for set-up? Y N
If yes, you need to contact Facility Services BEFORE you proceed to receive a dig permit.
Site will be removed of any debris and materials by this Date:___________________ Time:_____________am/pm
(see PM 68 for official time period allowed for clean up, typically 24 hours)

Detailed Event Set Up
Please write out a description of how the grounds may be altered for the set up of the event (Please include any props, stages, fencing, sand, water, etc):

Contact Information
Name/Title: ___________________________ Cell Phone: ___________________________ Email: ___________________________
Advisor Signature: ___________________________ President Signature: ___________________________

By signing this form you are consenting to the approval of the set up of this event. If failure to clean up the event or damage to the area occurs, you will be charged by Facility Services for clean up or repair of the grounds. Failure to clean up the event or damage to the grounds could restrict the organization from having similar events in the future.

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Please draw out an overhead view of what the property will look like with the set up (please include the house in this depiction).

Please note that you may not begin set up for the event until you have received prior approval from Facility Services.

Date Form Approved: ____________________  Approved By: _____________________________________________

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Facility Services Staff

Greek Life Staff

Comments: __________________________________________________________________________________________

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