tree logo small**THE EVERGREEN STATE COLLEGE**

MEALS & LIGHT REFRESHMENT AUTHORIZATION REQUEST

Complete this form whenever meals or light refreshments are served at meetings or formal College sponsored training sessions. Attach a copy of the agenda, brochure or registration form if available.

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| Name of Event    South Sound Graduate School Fair, Fall 2024 | | | Purpose of Event  To offer opportunities for current students and graduate program representatives from all over the country and globe to connect over graduate educational opportunities students can pursue with our attending colleges and universities. | |
| Event Date  10/08/2024 | Event Begin & End Time  3:00pm-6:00pm | | Event Location  Evans Hall, 2nd Floor Lobby | |
| Sponsoring Dept. & Org to charge  MES, 25101 | | Dept. Contact Name & Phone #  Averi Azar  (360) 7428746 | | Estimated Cost including Travel  $2,200.00 |
| Persons/Groups to Attend  Current Evergreen students, graduate program and school representatives, Evergreen faculty and staff, community members (event is open to the public and current in-service employees are being invited) | | | | |
| Justification for serving meals, or coffee and light refreshments  We are hosting this fair to support our current Evergreen students in connecting with graduate program representatives to learn about graduate educational opportunities and career pathways that students may be interested in or would like to learn more about. The food is for the representatives and faculty and staff who are staffing the event. Many representatives will be traveling from a far distance to be with us and the event will be hosted around dinner time and we would like to offer meals and refreshments to our recruiter guests and faculty and staff who are supporting the event. | | | | |

Check if the event is to be held in a State of Washington facility. If not, provide an explanation below why state owned barrier free facilities cannot be used, and verify with Accounts Payable at ext. 6350 that the non-stat facility is ADA compliant.

X

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| Requester | Signature | Date |

**CERTIFICATION**

I certify that the listed attendees are required to attend the indicated meeting or training session.

Official State business will be conducted. Meals or Light Refreshments are an integral part of the event.

|  |  |  |
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| Approving Vice President | Signature | Date |

Forward Approved form to Accounts Payable, MS: L1125