


Guideline for Hospitality form



CAL STATE LA

CALIFORNIA STATE UNIVERSITY, LOS ANGELES

AUTHORIZATION TO HOLD HOSPITALITY EVENT AND REQUEST FOR REIMBURSEMENT OF HOSPITALITY-RELATED EXPENSES

Appendix 8.3

☒ Authorization to Hold Event
☐ Request for Reimbursement

Type of Hospitality (select an option from the list): Student recruitment, Student Engagement and Student Leadership


1. Type of Participant: Student ☒ Faculty ☐ Staff ☐ Other ☐ Guests
2. Name of Department/Organization: Sikand STI Center
3. Prepared by: Jane Doe Extension: x5399
4. Date(s): January 1, 2025 Time: 8 am - 5 pm Location: Golden Eagle Ballroom 1
5. Title and Business Purpose of Event: To bring researchers together to discuss and share solutions for cl
6. Will UAS provide services for the event? Yes ☐ No ☒


*Note: All requests to host an off-campus event, purchase food from an off-campus vendor or the purchase of any food items from anyone other than University Auxiliary Services, Inc. (UAS) Dining Services must be approved by UAS as prescribed by Cal State L.A. Administrative Procedure 025. Please explain in detail in the space provided below the reason for the request. Signature of UAS Dining Services Director, or designee, is required prior to the event.

A) Provide list of expected attendees/RVP, include the business relationship of attendees to campus (attach separate list if needed); ** and B) Include the Event Flyer (or applicable documentation) and C) Estimated average cost of meal per attendee (as applicable)

** For large groups where the names of attendees is unknown, a description of the group and estimated cost of the meal per attendee may be provided in lieu of a list of attendees.

Name and Title of UAS Approving Authority: _____


 Approve


 Decline

Signature _____
 Date _____
7. Funding Source:*

	Account	Fund	Department	Program	Project ID	
CFS Chartfield	660855	SFXXX	2015XX	XXXXXX		\$ 4,500
CFS Chartfield	-Select-					\$
CFS Chartfield	-Select-					\$
TOTAL						\$ 4,500
8. Will alcoholic beverages be served? Yes ☐ No ☒

If yes, refer to Cal States LA Administrative Procedure 019, Use of Alcoholic Beverages on Campus.

I have read Cal State LA, Administrative Procedure 209, Hospitality Policy and hereby agree to abide by the provisions stated herein.

College's Associate Dean's name

Department Administrator Approver (Level 4 or above)

Signature _____ Date _____

College's Fiscal Office authorizer's name


Fiscal Authority Approver (Level 4 or above)


Signature _____ Date _____

President of Academic Affairs

Division VP/CFO Approver (Level 2 or above)

Signature _____ Date _____


 Approve


 Decline

Preliminary Information:

- Please find the [Hospitality policies](#) for your reference.
- Contact UAS Hospitality to obtain Banquet Event Order (BEO) before Hospitality is submitted (if UAS will be providing services for the event).
- Attach attendance list of all expected attendees, including students, faculty, staff and others and their respective affiliation.
- Attach event flyer to this form for submission.

STEPS:

1. Check the authorization to hold the event for approval.
2. Select the "Type of Hospitality" from the drop-down menu depending on the type of the planned event.
3. In line #1, check the boxes for the "Type of Participants" that will be attending the event.
4. In line #2, input the department hosting the event.
5. In line #3, input the department contact which is the person who is preparing the form.
6. In line #4, input the date and time of the event.
7. In line #5, input the title of the event and the purpose.
8. Check whether UAS will be providing services for the event.
9. For #7, include the funding source that will be charged for the event and the price included on the BEO.
10. Check whether alcoholic beverages will be served at the event.
11. Add the required individuals needed for signature and submit via Adobe Sign.

Routing Order for Adobe Sign:

1. PI of Grant – Approver
2. UAS Approving Authority – Signer (Only if food is not from UAS)
3. Resource Manager – Signer
4. Department Approver – Signer (Usually the Associate Dean)
5. Academic OPB
(academicopb@csula.onmicrosoft.com) – Approver
6. Director of Academic Resources – Approver
7. Provost or Vice President of Academic Affairs – Signer

If UAS is not providing food:

- EHS Approval is required, and you can submit a form using this [Web Form](#).
 - This EHS Approval needs to be added to the document and can be placed under the invoice or estimate of the food.