



INDIANA UNIVERSITY

TEMPORARY EVENT FOOD SERVICE APPLICATION

NAME OF EVENT: _____

DATE SUBMITTED: _____ NUMBER ATTENDING: _____

LOCATION OF EVENT: _____ DATE: _____ START TIME: _____ END TIME: _____

NAME OF GROUP (OR VENDOR) SERVING FOOD AT EVENT: _____

NAME OF PERSON IN CHARGE OF EVENT: _____ PHONE: _____

ADDRESS: _____ FAX: _____

- LIST ALL FOOD AND DRINKS TO BE SERVED AND SOURCE OF PRODUCT
- YOU MUST PROVIDE A COPY OF THE MOST RECENT INSPECTION REPORT. (Available at the County Health Department or the Restaurant/Grocery/Caterer/Facility)
- Please note that groups may NOT serve any food prepared in their homes. This includes baked items.

MENU (List all food, drinks, & alcohol*)

SOURCE OF FOOD (Name and location of grocery, caterer, restaurant)

IMPORTANT: Hand-washing facilities MUST be provided for your event!

1.) How will food be cooked at event? _____

IMPORTANT: Reheated foods must be rapidly heated to 165°F prior to serving!

2.) How will food be kept hot? (Above 135°F) _____

3.) How will food be kept cold? (Below 41°F) _____

4.) How will food be transported? _____

5.) How long in transit? _____

HOW WILL FOOD BE PROTECTED FROM CONTAMINATION DURING STORAGE, SERVING AND DISPLAY?

*You must submit form **at least 7 days** in advance of event:*

Food Protection Program
University Office of Environmental Health and Safety Management
1514 East 3rd Street
Bloomington, IN 47405

PHONE: 812.855.6311 FAX: 812.855.7906

Email: gmckeen@indiana.edu or jmodglin@indiana.edu

www.ehs.indiana.edu

- APPROVED by EHS _____ Approved by Student Activities office (if applicable) _____
- DENIED by EHS _____ Approved by RPS (if applicable) _____

*Please check this box if alcohol will be served at the event. See <http://www.indiana.edu/~riskmgmt/alcohol.htm> for University coverage requirements for liquor liability.