



Catering Exception Request Form

Phone: 910-775-4194

Email: catering@uncp.edu

Event Information

Title of Event: _____

Date of Event: _____

Location of Event: _____

Number of People Attending: _____

Event Start/End Times

Start Time: _____ End Time: _____

Event intended for: _____

Contact Information

(The contact listed here MUST be present at the event)

Contact Name: _____

Phone: _____

Email: _____

Organization/Department: _____ (No Abbreviations)

Proposed Caterer Information

Proposed Caterer: _____

Caterer Contact Person: _____

Phone Number: _____

Please explain the justification for an exception.

Attach a menu and pricing or use the space below to describe menu.

Below to be completed by the General Manager or District Manager:

Date Received		Date Responded	
Approved?		Signature	

Below to be completed by the Director of Auxiliary Services:

Date Received		Date Responded	
Approved?		Signature	