Direct Sales/Solicitation Request Form



Name of Group:				
Name of Additional Orga	aniztions/Depart	ments Involved:		
Date of Submission:				
Type of Event:				
Request for permission t		Sale te Printed Material		Erect Display Sell or Distribute Food Request Denied
Date of Event:				
Location: Building	ngRoom #			
Have you confirmed the re	eservation?	Yes No		
Describe Nature and Pu Event/Request:	-			
If Sale, please indicate tota Who shall benefit financia	al value of items t	to be sold:es?		
Please describe items to	be sold:	Name of Suppl	lier:	
1.				
2.				
3.				
Names of Individuals Re				
Name	Address	Telephone		Student #
Name	Address	Telephone		Student #
If food is involved: Letter	from the Health	Inspector		Yes 🗆 No 🗀
For Internal use Only:		Data		
Solicitation Approval:				
Committee Approval:				
Instructions:		· · · · · · · · · · · · · · · · · · ·		
Copies to: Registrar	's Office 🔲 Bu	ilding Manager 🔲 🛚	Informat	ion Desk

All sales must be approved through the Solicitations Committee, as per Administrative Policy No. GE. 20.0. This form must be at each sale event.

This form can be submitted by emailing: spevent@uoguelph.ca

If you have any questions about the approval process please email spevent@uoguelph.ca or call 519-824-4120 ext: 52822.