Scranton School District
School Event
Permission Form

Name: **Phone#:**

Name of School / Location Where the Event Will Take Place:

Date this form was submitted (must be two weeks prior to event):

Event Date:

Start Time: _____ End Time:_____Doors Open Time:_____

Type of Event:

Is your School sponsoring the event, or some other entity, if so, please specify:

Estimated number to attend the event:

Summary of the event:

_____

_____

_____

**Who will be attending from outside of the SSD community?
(do not list SSD employees)**
_____

_____

Superintendent or designee approval:_____
Superintendent or designee denial: _____

If approved move to step 2:

Step 2

Does facility usage policy apply to this event: yes_____   no_____

*If the event is approved and the facility usage policy does not apply you may proceed with the event as planned.
*If the event is approved and the _facility usage policy does apply_, fill out the paperwork in order to proceed with the planning of the event. The event is not approved until all the facility usage paperwork is completed and approved.