



DIABLO VALLEY COLLEGE

Catering Event Request For DVC college activities

Culinary Arts Department

Complete form and obtain signature, then fax or email to Chef Brian McGlynn: fax: 925-687-2557; BMcGlynn@dvc.edu

Today's date _____

Name of event _____

Date of event _____ Time of event _____

Location of event _____

deliver to location Y N

Number of guests _____

Type of menu

breakfast lunch dinner appetizers h'ors d'oeuvres other _____

Would you like your event plated buffet

Service style

casual formal self serve buffet other _____

GL# (or credit card/number) _____

Department _____ Contact person _____

Phone _____ Fax _____

Email _____

Manager's signature _____

NOTE: FOR EVENTS AFTER 5 PM OR WEEKENDS an "[Application for staff use of college facilities](#)" is required to complete this request.

For questions call Chef Brian McGlynn 925-969-4304

FOR CULINARY USE ONLY - Special instructions for food and set up

(Note: For any event serving beer/wine, a one day alcohol license request must be submitted to the DVC Foundation Office 30 days prior to the event.)

food _____

special diet requirement _____

beverage _____

seating/room set up _____

audio/visual _____

other special requests _____

copy of completed form submitted to the Dean of Business Education