



# YALE UNIVERSITY POLICE DEPARTMENT REQUEST FOR POLICE SERVICES

<b>Date of Request:</b>
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<b>Requesting Organization:</b>	<b>Person Making Request:</b>
	<b>Telephone:</b>
<b>Person Responsible for Bill:</b>	<b>Billing Address:</b>
<b>Telephone:</b>	

### Event Information

<b>Event Date:</b>	<b>Event Start Time:</b>	<b>Event End Time:</b>
<b>Type of Event:</b>	<b>Event Location:</b>	
<b>Expected Number Attending:</b>	<b>Alcohol Served?</b>	<b>Number of Officers Required:</b>
<b>Open to Non-Yale Students?</b>	<b>Signature of Master/Dean/other responsible person (if necessary)</b>	

### Police Department Use Only

<b>Officers Assigned</b>	
1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

<b>Additional Information:</b>
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<b>Received by:</b>	<b>Charge Number:</b>
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