

Compass One Catering Waiver (DRAFT)

Personal Information

Name: _____ email: _____

Phone number: (____) ____ - _____ Date Submitted: ____/____/____

Club or Department: _____ Waiver request must be no less than 3 business days prior to the event date

Event Information

Date of Event: ____/____/____ Number of Guests Expected: _____

Event Budget: _____ Event Number: _____ (from Events Services)

Reason a Waiver is requested:

___ Authenticity Concerns ___ Budget ___ Relationship with Vendor

___ Poor Prior Service ___ Ethnic Reasons ___ Other: _____

Do you have a quote from an outside company? NO ___ YES ___

- If yes, please attach to this waiver request.

Has the event been waived before in the past by Compass One? NO ___ YES ___

- If yes, please attach approved waiver

Official Use Only:

Waiver: ___ Granted ___ Denied

Date: ____/____/____ Reason: _____

Signature of Compass One Manager: _____

Disclaimer: Compass One, as the contacted food service provider, holds the right to approve or disprove any or all waiver requests. Compass One is not obligated to "price match" an outside vendors quote. Prior granted waivers do not guarantee future waiver requests.