

Fairmont State University
Pierpont Community & Technical College
NON-COMMERCIAL SOLICITATION PERMIT APPLICATION

TODAY'S DATE: _____
(MONTH) (DAY) (YEAR)

ORGANIZATION: _____

CONTACT PERSON: _____

NUMBER OF PARTICIPANTS : _____

ADDRESS: _____

(City) (State) (Zip)

(Home) (Work)

EMAIL: _____

TIME AND DATE OF PROPOSED ACTIVITY: _____

NATURE OF PROPOSED ACTIVITY (i.e. solicitation, circulation of petition, distribution of literature, and description of any intended sound amplification):

(Please attach copy of any handouts, literature, etc. to be distributed)

SUBMIT APPLICATION TO:

Robin Yeager
Falcon Center- Student Activities Center
Office Address: 316 Student Affairs Suite
Office Telephone: 304-367-4783
E-mail: Robin.Yeager@fairmontstate.edu (Preferred)

I have received and read a copy of the Campus Solicitation Policy. I, and the organization that I represent (if applicable), hereby accept the terms and conditions of said policy.

APPLICANT'S SIGNATURE **DATE**

Use Permit Approved: _____ **Use Permit Not Approved:** _____

Reason(s) if Not Approved: _____
By: _____
Authorized Signature **Date**