

## **Facility Application Request Form**

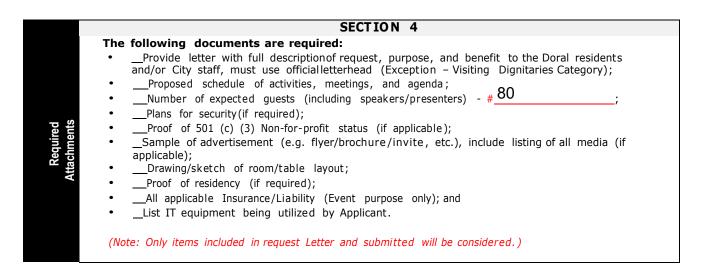
Please complete this form and send it to the Public Affairs Department via Karla.Fernandez@cityofdoral.com. Your Request Form will be reviewed, and you will be contacted accordingly. You may not proceed with an invitation or advertisement of the event until your request has been approved. For requests approved administratively, application must be received with all required documentation, a minimum of (2) weeks prior to proposed event date. For requests requiring Council approval, please allow a minimum of (2) months prior to proposed event date.

<u>Note:</u> Type Use Categories requiring Council approval also require this Form and are routed to the Requestor/sponsoring Councilmember.

Name of Requestor/Sponsor: Millennia Atlantic University Alumni Association

Date: 4/1/2024

	SECTION 1				
	Applicant Name: <u>Jairo Cruz</u>				
	Agency Name: Millennia Atlantic University Alumni Association				
	Office Address: 3801 NW 97 Ave				
int	Contact No.: 786-863-6135 E-mail: jcruz@maufl.edu				
lica					
Applicant	SECTION 2				
Å					
	Meeting/Event Title: III Symposium on Educational Internationalization and Academic Mobility between Sister Citi				
	Date(s): From <u>9/20/2024</u> To <u>9/20/2024</u>				
	Weekend or Observed Holiday [X] No [] Yes				
	Time: Begins: <u>10 am</u> Ends: <u>6 pm</u>				
uo	Frequency: X One Time Request,Annual,Monthly, Other:   Preferred Facility Location: [] Government Center 1 <sup>st</sup> Floor Multipurpose Room   [check only one] [] Government Center 1 <sup>st</sup> Floor Lobby   [] City Council Chambers				
cati					
Loc					
me/	<b>Preferred Facility Location:</b> [] Government Center 1 <sup>st</sup> Floor Multipurpose Room				
¢∕Tii	[check only one] [] Government Center 1 <sup>st</sup> Floor Lobby				
)ate	[] City Council Chambers				
	[] Government Center 3 <sup>rd</sup> Floor Training Room				
	[x] Police Training and Community Center				
ed	χ <sub>1</sub> Folice fraining and community center				
est	Council's Participation Requested* [X] Yes [] No				
Requested	*The City reserves the right to extend an invitation to any elected body or charter official.				
Re					
	SECTION 3				
	Please refer to the Use of Facility Guidelines for Category Definition				
	[check only one]				
se	[] Government Collaboration [] Sister Cities Program				
Type of Use	[] Public Education Institution [] Visiting Dignitary				
e 0	[X] Non-profit Organization [] Civic Association				
yp					



## SECTION 5

Select purpose of use: [select only one]

[] Meeting or

For Logistical Purpose

X Event (select event type below)

[] Workshop [] Reception 🕅 Symposium [] Ceremony [] Gala [] Other:

## Select if applicable:

[] Open to City residents "Only"

- [X Open with no restrictions "Open to all"
- [] Use of facility for art or cultural purpose
- [] Food and drinks will be served
- $\bigotimes$  Media attending/recording during use of Facility

The following exhibit to this application is fully incorporated herein as if set forth herein:

- Exhibit A Use of Facility Guidelines
- Exhibit B Facility Use Policies and Procedures

By signing this Application, the Applicant affirms receiving and reviewing the Facility y Application Request Form, Use of Facility Guidelines, and Policies and Procedures.

This Applicant further certifies that the Applicant's policy-making body shall adhere to all stipulated requirements per the City's Policies and Procedures.

Applicant Name & Title: Jairo Cruz. Sympo	osium Organizer			
(Print Name/Title)				
Applicant Signature:	-	4/1/2024		
ADMINISTRATION USE ONLY				
		Date	_	
Approved Denied by: Public Affairs De	partment	Date		
Approved as to Form & Legal Sufficiency for the				
Use and Reliance of the City of Doral Only:	Office of the City Attorney	Date		
ApprovedDenied by: Office of the City	Manager	Date		
If applicable:				

Revised November 15, 2023