UCI MAJOR EVENTS POLICY APPEAL

So that we may consider your appeal under Sec. 900-15: UCI Major Events Policy, Part F.6 (<u>http://www.policies.uci.edu/policies/pols/900-15.html#appeal</u>), please complete this form and email it to <u>provost@uci.edu</u>:

Client(s) Making Appeal:			
ADDRESS (Number, Street, City, State, ZIP)	EMAIL ADDRESS		
Client 2			
FULL NAME (Last, First, Middle Initial)	PHONE		
ADDRESS (Number, Street, City, State, ZIP)	EMAIL ADDRESS		
Client 3			
FULL NAME (Last, First, Middle Initial)	PHONE		
ADDRESS (Number, Street, City, State, ZIP)	EMAIL ADDRESS		

Event Details:			
NAME OF EVENT		DATE OF EVENT	
The specific deci	sion relating to security measures or recommendations that you are app	ealing:	
The security mea	sures that you propose and an explanation of how they would:		
•	Minimize any identified threat to health and safety of the event particip		
•	Minimize any identified threat to the campus and surrounding commu	nity;	
•	Maximize the ability of the Client to successfully hold the event;		
•	Protect the exercise of rights of free expression by the Client, particip	ants and community; and	
•	Anything else you think is relevant to your appeal.		