

# 2020-2021 Permit Application



475-220-1647  
375 Quinnipiac Ave  
New Haven, CT 06513

Application must be submitted 3 weeks in advance for all use of NHBOE Facilities

## General Information

### Primary Contact Name \*

First Name (Please print clearly) Last Name

### Program/Organization Name \*

### Email Address \*

example@example.com

### Have you previously used or held a program at a NHPS location?

YES  
NO

### Organization Phone Number \*

Area Code Phone Number

### Organization Address \*

Street Address (NO PO BOXES)

Street Address Line 2

City

State / Province

Postal / Zip Code

## Program Overview

### Is this a

School Sponsored Event  
City Sponsored Event  
Outside Organization  
Other

### Is your program geared towards

NHPS Students  
Adults  
Community Members  
Other

### If your program services children, what age range?

### How many adult participants? \*

Adults Participating

### How many child participants? \*

Children Participating

### How many adult supervisors?

### Is your program licensed by the OEC?

YES  
NO

### Are you a 501 (c)(3)

YES  
NO

**What type of program are you offering**

- Academic
- Arts / Performing Arts
- Athletic
- Religious
- Other \_\_\_\_\_

**What percentage of participants are New Haven residents? \***

- 100% live in New Haven (program not open to non-residents)
- 75% live in New Haven
- 50% live in New Haven
- Less than 50% live in New Haven
- None are from New Haven

**Are you willing to use an alternate location?**

- YES
- NO

**Will you be serving food**

- YES
- NO

**Location Request Details**

**Name of School Requested (1st choice) \***

**Frequency**

- One day request
- Recurring or multiple days

**What days would you like your program to operate?**

**Area(s) Requested \***

- |               |            |
|---------------|------------|
| Auditorium    | Cafeteria  |
| Gym           | Library    |
| Outdoors Only | Classrooms |

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday
- Sunday

**Requested Start Date**



Month   Day   Year

**Requested End Date**



Month   Day   Year

**Start Time (include AM/PM)**

**End Time (include AM/PM)**

**Description of program or event**

**Is your program sponsored by or in partnership with the NHPS? Please provide documentation of partnership.**

YES (If so, provide brief description on following page)

NO

**If a partnership exists, please describe**

## **Insurance (certificate required 10 days in advance of start date)**

**Policy Effective Date**

**Policy Expiration Date**

**Insurance Policy #**

**Name of Insurance Company**

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## **Coronavirus & Health Protocols**

**Do you have a wellness and safety program in place to prevent the spread of Coronavirus and other types of illness?**

YES

NO

**Please explain what precautions you are taking to screen participants for wellness and uphold physical distancing requirements:**

**Please explain what your procedure is in the event of suspicion or confirmed case of COVID-19**

If said permission is granted we hereby agree to strictly comply with the rules and regulations of the Board of Education governing the use of public school buildings, to take the utmost care in the use of the school property, to make good any damage to or loss of school property arising from our occupancy of any portion of the building. The New Haven Public Schools reserves the right to terminate any permit due to district needs of the facility, misconduct, or due to non compliance of rules and regulations of building use.

Requests must be received in this office at least three (3) weeks prior to the start date. Programs will be approved based upon merit and perceived value to students of the New Haven Public Schools and the New Haven Community. Approvals are NOT solely based on "first come, first serve" basis.

If application is approved and payment applies, payment in full must be received at a MINIMUM of (10) business days prior to event/program start date in the form of a certified bank check or money order.

**CASH IS NOT ACCEPTED.**

The NHPS reserves the right to require security, audio visual, or other staff based upon details and specifications of program. Permit will be issued following receipt of payment. Any permit changes, including cancellations, must be requested and approved seventy-two (72) hours before the event. Failure to comply may result in additional charges. We recommend not advertising your event until the permit has been finalized. By signing below, you affirm that you have received, read and agree to comply with the NHPS Building Use Rules and Regulations

**EMAIL APPLICATION TO: [heather.barbarotta@new-haven.k12.ct.us](mailto:heather.barbarotta@new-haven.k12.ct.us)**

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FOR OFFICE USE ONLY

**Signature of Appicant**

**Date**



Month    Day    Year

**Date Received**

**Office Initials**

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