



**Policy Series #: 1000(P) - Administration**  
**Policy Manager: Adenuga Atewologun**  
**Alcoholic Beverages or Controlled Substances on Campus Check List**

**PURPOSE:** The purpose of this procedure is to outline steps necessary for approval of limited alcohol use, sale, or distribution on campus. This is consistent with MnSCU Procedure 5.18.2 located at <http://www.mnscu.edu/board/procedure/518p2.html>

**Instructions for Completion of Event Approval Check List:** A review of the following information and completion of the approval form is essential prior to approval of an event at which alcoholic beverages or 3.2 malt liquor will be served.

**MnSCU INSTITUTION:** Indicate on which campus the event will be held.

**NAME/DESCRIPTION OF EVENT:** Indicate the name of the event (if there is one, e.g. A Founders Club Banquet or University Spring Fling.) Give a brief description of what the event actually is and what its purpose is. Since the law is different for types of beverages being served, the type of beverage should also be indicated. *See the glossary of terms below for guidance.*

**DATE AND TIME OF EVENT:** Self-explanatory.

**SPONSOR OF EVENT:** Indicate if there is some campus club or group, local community organization, or other group that the actual promoter of the event. This should be the group, organization or individual that is organizing the event.

**HOW LIQUOR IS DISPENSED:** It is important to identify who will dispense the beverages and how that person/group will be paid. If the event is catered and the college or university only provides the location, then the state host liquor coverage will defend the institution in the event a claim is brought against it.

**LOCATION OF EVENT:** Indicate where on campus the event is to be held. If this is an off-campus event (albeit sponsored by the institution), also indicate the off-campus location.

**MnSCU INSTITUTION CONTACT PERSON:** This should be the individual the chancellor or others can go to for specific information about the event. This will be the primary contact person for information at the campus.

**SPONSOR RESPONSIBLE PERSON:** This should be the primary contact person in the group or organization that is sponsoring the event. This may or may not be a State employee.

**INSURANCE PROVIDED:** This insurance information is extremely important. The state is not insured for dram shop (liquor event) liability. This insurance must be purchased by the event sponsor. If the sponsor is a state agency (other than MnSCU), the insurance must be purchased through the Department of Administration Risk Management Division per Minn. Stat. 16B.85. If a MnSCU institution (per Minn. Stat. 15.38, Subd. 3) is the sponsor, the insurance must be purchased either on the local market or by arrangement through the Department of Administration Risk Management Division (Marlys Williams, 651-201-2591, or Carol Morgan, 651-201-2593). For state agencies and MnSCU, insurance up to the statutory limits must be provided. [Per Minn. Stat. 3.736, Subd. 4, the minimum coverage shall be \$500,000 per occurrence] If the event sponsor is not a state agency or MnSCU, insurance must be purchased in the local market with minimum limits of \$2,000,000 per occurrence/\$2,000,000 annual aggregate. The institution, MnSCU and the state of Minnesota must be added as an Additional Insured on the sponsor's policy. (For example, frequently a group such as the local Jaycees or Lions will host the event, and they usually already have this kind of insurance.) If the institution purchases its own insurance coverage, it must do so out of non-state-money.

If the event sponsor is not a state agency or MnSCU, general liability insurance must also be purchased in the local market with minimum limits of \$2,000,000 per occurrence/\$2,000,000 annual aggregate. The institution, MnSCU and the state of Minnesota must be added as an Additional Insured on the sponsor's policy.

**LICENSE INFORMATION:** Most municipalities require a license for events where alcohol or 3.2 percent malt liquor beverages are being sold. There may be other local restrictions on the service of alcohol as well. The institution and/or sponsor must check with the local authorities in order to determine if the contemplated event is one that requires some type of license.

**SOURCE OF FUNDING:** As noted above, no state money may be used to purchase, serve, or underwrite the sale or service of alcoholic beverages or 3.2 percent malt liquor. This includes state general fund, and grant funds. The Attorney General generally considers student activity funds to be "state money" even though the expenditure of these funds for this purpose does not go through the state treasury. **Spending should be limited to donated or foundation money.** Please call for guidance on specific questions. If there is a cash bar or the beverages are included in the price of the ticket, the school should not become involved in the financial transaction. Contributions by the foundation or a business should be separate transactions and not a part of the liquor event.

The Attorney General has also advised that payment or donations to an event where alcohol service is incidental to or part of a meal is also covered by state law relating to liquor (Chapter 340A).

Prior to an event involving service of alcoholic beverages or 3.2% malt liquor taking place, the **Riverland contact person (requestor) must complete the following information and send it to the college president for review and approval.**

**The check list on the following page must be completed** in order to comply with System Procedure 1A9 to assure that most potential legal, liability and insurance issues have been addressed.

A copy of this form must be retained in the Office of the President for a period of three years.



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Check List for Events Involving Alcoholic Beverages or Controlled Substances on Campus

**Name/Description of Event** *(include type of alcohol to be served):*

**Date & Time of Event:**

**Sponsor of Event:**

**Location of Event:**

**Riverland Community College Contact Person:**

- Name:
- Title:
- Street Address:
- Office/Cell Phone:

**Sponsor/Responsible Person:**

- Name:
- Title:
- Street Address:
- Office/Cell Phone:

**Dispensing of Beverages** *Indicate who will dispense the beverages and how that person/group will be paid. (see instructions under "How Liquor is Dispensed" for assistance):*

**Insurance Provided**

- Name of Insurance Company:
- Name of Agent/Agency:
- Coverage Limits: Indicate (and identify) if insurance is held by organization other than State or event sponsor.

**License Required by Municipality?**

If so, has it been secured?

In whose name is the license issued?

**Source of Funding:**

**Approved by:** \_\_\_\_\_  
College President

**Date Approved:** \_\_\_\_\_

Date of Initial Review by President's Cabinet: 2/14/2013

AASC Review (if applicable):

FSGC Review (if applicable): 3/13/2013

Date of Final Approval / Policy Adoption: 3/14/2013

Date & Subject of Revisions: