

USE OF SCHOOL FACILITIES

The Board believes that the school facilities should be available to the community for educational, recreational and/or entertainment purposes. In allowing the use, however, the Board will comply with all restrictions outlined in Education Law. All requests for use of school facilities will require the completion of the School Facilities Use Request form. The Board of Education has absolute discretion in refusing a use request and in prescribing the terms, if the use is allowed. This policy will be reviewed annually at the re-organizational meeting.

Use of the building by not for profit community groups, continuing educational groups, and Sharon Springs Central School Groups, during hours when custodians are on duty, may be approved by the Superintendent, the Business Manager, or Principal at no charge.

Individuals or groups not covered above, wishing to utilize the school, must apply for, and receive, prior approval from the Superintendent, Business Manager, or Principal.

Room charges are as follows:

Classroom	\$20.00
Gymnasium(old)	\$30.00
Gymnasium(new)	\$50.00
Auditorium	\$100.00
Cafeteria	\$30.00
Kitchen	\$50.00
Library	\$30.00

Any groups or individuals wishing to utilize the building during hours when custodians are not on duty (for example from Friday 12:00 midnight through Monday, 5:00 a.m.) or on holidays and some vacations, will be required to pay actual cost to the district including fringe benefits for custodial services. That fee will vary depending on the rate the custodian earns while on duty. Assignment of custodial services will be at the discretion of the administration.

All groups and individuals must understand that school sponsored activities will have first priority. All groups shall submit a "School Facilities Use Request" form in advance to the administration for consideration and approval.

Section 414 (1) NYS Ed. Law
Federal Equal Access Act (20USC section 4071)

SHARON SPRINGS CENTRAL SCHOOL CUSTODIAN _____
SCHOOL FACILITIES USE REQUEST FORM CALENDAR _____
 (Requests should be processed at least two weeks prior to the date of use).

Person Making Request **Name of Organization**

Date(s) of Use **Start Set Up** _____ **End Clean Up** _____
Event Begins at _____ **and ends at** _____.

Purpose/Type of Activity **Admission Charge?** Yes or No

Any profit making activities Y/N Describe

CHECK AREA(S) NEEDED: _____	Place on District Calendar _____	Hallway/Atrium _____
_____ Auditorium	_____ Boys' Locker Room	_____ Library
_____ Gymnasium(New)	_____ Girls' Locker Room	_____ Parking Lot
_____ Gymnasium (Old)	_____ Cafeteria	_____ Music Room
_____ Soccer Field	_____ Classroom (indicate if specific room) _____	
_____ Other _____		

Name of School Staff member who will be present during the entire use of the building: _____

If a school function, list chaperones by name: _____

The requesting organization and its agent and/or the person signing this form agrees to be responsible for the condition and cleanliness of the premises upon departure. The requesting organization further agrees to notify the Main Office immediately should any damages to the building or other property be sustained during the event.

By: _____ Address: _____
 Signature _____

 Telephone _____ Today's Date: _____

ADMINISTRATIVE REVIEW: _____ School Group _____ Non-School Group
 _____ None _____ Custodial
 _____ Cafeteria _____ Administrative

Evidence of Insurance? _____ Yes _____ No _____ Not Applicable
 If yes, attach supporting document. If no, has B.O.E. waived the requirement of insurance?
 (____ Yes ____ No) – B.O.E. Meeting Approval Date: _____.

CHARGES: Check here if all charges have been waived: _____ If not: _____
 Custodial Help: # of personnel: _____ Total Hours: _____ Total Salary: _____
 Cafeteria Help: # of personnel: _____ Total Hours: _____ Total Salary: _____
 Room Charges:
 _____ Classroom (\$20) _____ Old Gymnasium (\$30) _____ New Gymnasium (\$50)
 _____ Cafeteria (\$30) _____ Kitchen (\$50) _____ Other (Describe)
 _____ Library (\$30) _____ Auditorium (\$100)
 Total Room Charges: \$ _____
Total Charges: \$ _____

Approved & Scheduled: _____
 Business Manager Date

 Superintendent of Schools Date

