

UNIVERSITY OF CENTRAL FLORIDA

Police and Public Safety 3610 Libra Drive Orlando, FL 32816-3550

Public Safety Request Form

This form is to be used when requesting personnel or services from UCF Police and Public Safety only.					
Please provide the following information:					
Organization:	Event Name:	SAFE Form	# E	Event Date:	
Personnel requested:					
	Number of Police Office	ers Not Sure [
	Start Time:	End Time:			
Duties requested (Check all that apply):					
Sec	urity	Crowd Control			
Escort		Road Closure			
Traf	fic Control	Other:			
The police department can also provide the following services / equipment, if needed (Check all that apply):					
Visual messag	ge boards Light	Towers Steel Ba	arricades	Cones	
If any of the above services are selected, someone from the police department will reach out to discuss further and provide a quote.					
Name of Authorized Representative		he event)	Phone Number		
Signature of Author		Date			