Johns Hopkins University School of Medicine
Alcohol Policy

Intoxication in the workplace is considered unprofessional behavior. Therefore, this policy shall regulate the use of alcohol at school sponsored/sanctioned **medical** student events **on the premises of** the Johns Hopkins University School of Medicine and Health System.

1. Appropriate measures must be taken to ensure that guests/participants under the age of 21 do not have access to alcoholic beverages.
2. At events where alcohol is served, the organizers must provide food and ample non-alcoholic beverage choices.
3. All events serving alcohol are required to contract bartenders to oversee the distribution of alcoholic beverages. Bartenders are expected to deny alcohol to anyone who appears to be impaired from alcohol.
4. The organizers of such events must complete a form (Appendix A) and meet with one of the Associate or Assistant Deans of Student Affairs to obtain approval for the event.

**Event Alcohol Approval Request Form**

1. By my signature below, I confirm that I have read and understood the Johns Hopkins University policy regarding the serving of alcohol at school sponsored/sanctioned events.
2. I further attest that I will abide by the stated policy.

Name/date/location/duration of event:

Type/quantity of alcohol to be served:

Type/quantity of food to be served:

Name of bartender(s)/bartending agency with contact info:

Printed name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *Student Signature (Student Group Representative)*

Printed name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *Student Affairs Representative*