



Carrollodge

Phone No. – 440-338-6221

BEFORE GOING

The day before your reservation, come to the VPSAO to pick up keys and a facilities information packet.

DIRECTIONS – 14525 Chillicothe Road, Novelty, OH

Take Fairmount going East about 12 miles to the traffic light at Chillicothe Road (Rte. 306). Turn right on Rte. 306 and drive 1.2 miles and Carrollodge is on the left.

Note: Be careful not to lose Fairmount Road after crossing I-271. Follow the road with the median strip. The Fairmount Road and Rte. 306 intersection is at the bottom of a steep hill. The entrance to Carrollodge is diagonally across from Whispering Pines. It is the second of the two mailboxes (#14525). The Carrollodge driveway is very long, hilly and winding. Be very careful when driving up it especially in inclement weather.

UPON RETURN

Turn in the keys, payment and the Event Evaluation and Checklist form to the VPSAO upon your return to campus. If the office is closed, return these items immediately on the next business day.

ALARM INSTRUCTIONS

Alarm instructions will be given to you at the time of picking up the keys.

KEY RETURN

Keys must be returned by 12:00 noon on the day following the event. A \$10 charge will be assessed for each day late.

EMERGENCY CONTACT INFORMATION

For emergencies while at Carrollodge call:

- JCU Campus Safety Services (216) 397-1234
- Office of VP for Student Affairs (216) 397-4213 (during business days/hours only)
- Fire Department 834-8111
- Police Department 635-1234
- Medical emergencies 911



Event Evaluation and Checklist

Thank you for completing this form. Your evaluation will assist us in ensuring the proper maintenance of these facilities. Please return this form along with the keys upon your return to campus. If the offices are closed, turn them in on the very next business day. Thank you!

1. Alarm set (on) _____
2. Garbage (collected and removed) _____
3. House (clean and in order) _____
4. Dishes (washed and put in cupboards) _____
5. Food removed (refrigerator emptied) _____
6. Equipment returned to its proper place _____
7. Number in attendance _____

Purpose of event:

Policy violations and/or concerns during use:

Suggestions for improvement of the facility:

Do any repairs need to be brought to our attention? If so, please indicate.

Keys returned to:

(Print - VPSAO employee's name)

Guest name: _____

(Print)

Guest signature:

Date: _____

Telephone: _____

Email: _____