STUDENT ACTIVITIES BUDGET REQUEST form

Requestor:       Group:

Email:       Phone:

Did you receive Student Activities Funds last year? ___Yes ___No (If ‘Yes’ please attach a Budget Report)

Proposed Project or Activity: (Please use the back of this sheet or include attachments as needed.)

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

How will students benefit from the use of these funds? (Please include # of students to benefit):

_____________________________________________________________________________________
_____________________________________________________________________________________
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PROPOSED BUDGET

<table>
<thead>
<tr>
<th>Account # (if known)</th>
<th>Budget Category</th>
<th>Amount Requested</th>
<th>Explanation</th>
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TOTAL

Requestor’s Signature       Date       Supervisor’s Signature       Date

Vice President’s Signature       Date

Please Return SIGNED form to the Student Life Office.

Funds Requests must be submitted by DEADLINE for consideration.