

PROPOSAL FOR PET FOOD FUNDING

Before requesting funding, please obtain a copy of Guidelines for Usage of Pet Food Funds and carefully familiarize yourself with this document. Proposals will be denied a hearing, or funding, if they do not meet the criteria set out in these guidelines, or if the proposal form is filled out inaccurately, incompletely, or inappropriately.

Individual Experience Affiliate Organization Event SCAVMA Sponsored Event

Title of Proposal: _____

Date of Event/Experience: _____

Location of Event/Experience: _____

Person(s) Primarily Responsible for Proposal: _____

Sponsoring Club(s) (if applicable): _____

Description of Event/Experience:
(Be as detailed as possible in the space provided)

Estimated Cost of Event/Experience:

Amount of PFF's Requested:

Students Requesting Funding:
(Individual Experiences Only)

We, the undersigned, have read the Guidelines for Usage of Pet Food Funds, and if this proposal receives funding we shall take responsibility for fulfilling all of the obligations listed there.

YE

SIGNATURES OF RESONSIBLE PERSON(S): _____

**RETURN THE COMPLETED FORM AND ATTACHMENTS TO THE SCAVMA SECRETARY.
ALL FORMS MUST BE SUBMITTED AT LEAST ONE WEEK PRIOR TO THE HEARING.**

PROPOSAL FOR PET FOOD FUNDING

**RETURN THE COMPLETED FORM AND ATTACHMENTS TO THE SCAVMA
SECRETARY.
ALL FORMS MUST BE SUBMITTED AT LEAST ONE WEEK PRIOR TO THE
HEARING.**