March 2017 Student Activity Fee Application

- 1. Requests must be received by the Office of Student Life a minimum of six weeks before the event. Additionally meetings are held the first Thursday of each month and applications need to be in 1 week prior to the monthly meeting.
- 2. Please fill out the form completely, if for any reason a category does not apply to your request mark the area as N/A
- 3. The Application is required to verbally present each appeal request at the Student Activity Fee Committee meeting.
- 4. A plan must be attached addressing how the event could meet the needs of persons with disabilities who may be attending

Student Activity Fee Application

Radio Buttons (single item selection) [Required] Please indicate the type of funding category this request is for. Valid input: - Select only one choice.
[] Annual [] Supplemental [] Capitol
Name (Club or Cluster) [Required] Please put your name or your group name that is requesting funding.
Radio Buttons (single item selection) [Required] Please select a category Valid input: - Select only one choice.
 Recognized Student Life Club Student Life Cluster Individual SAC Student Co-sponsored Faculty/Staff
Contact Person
Phone Number [Required]
Address [Required]
Email [Required]
Name [Required] To indicate that your advisor is aware of this request please have them provide their information. Individuals need Student Life review)
Advisor Phone [Required]
Email [Required]
Name [Required] In order to be sure your department is aware of and approves this request, have them provide their information
Phone [Required] In order to be sure your department is aware of and approves this request, have them provide their information

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Program/Event Information or Conference Information

Name of Program/Event [Required]

If this is a program or event you are requesting money for what is the name, if not put N/A

Date & TIme [Required]

If this is a program or event you are requesting money for what is the date and time, if not put N/A

Location [Required]

If this is a program or event you are requesting money for where is it located, if not put N/A

Anticipated Audience [Required]

If this is a program or event you are requesting money for what is the anticipated audience, if not put N/A

Target Audience [Required]

If this is a program or event you are requesting money for what is the target audience (i.e. faculty, specific student demographic), if not put N/A

*Attach complete SAC facilities request if needed

Checkboxes (multple item selection) [Required]

What is the area(s) of focus? Check all that apply

- [] Special event(social, educational, community service, etc)
- Cultural (events celebrating specific communities)
- [] Leadership (Lecture series, conferences, speakers, etc)
- [] Professional Development (conference, workshop, mentoring, etc)

File Upload (8MB max)

Please attach a proposal letter, addressing the following:

- *Describe program/event and its goals.
- *Describe club/group mission, and how it relates to the event
- *Describe benefit(s) applicant participants and the SAC community will gain as a result of the event.
- *Describe collaboration efforts with the SAC student body, faculty, staff, and/or SAC departmental offices.
- *List volunteers, staff, students that will setup, breakdown, and run the event.
- *Describe what the funding will be used for and why it is necessary.

NOTE: After every program, an event summary & participation evaluation must be completed and turned into the Student Activity Fee Committee.

Name of Conference [Required]

If this is a conference you are requesting money for what is the name, if not put N/A

Date & Time [Required]

If this is a conference you are requesting money for what is the date and time, if not put N/A

Location [Required]

If this is a conference you are requesting money for where is it being held, if not put N/A

Target Conference Audience [Required]

If this is a conference you are requesting money for who is the target audience, if not put N/A

File Upload (8MB max) Attach conference agenda and information
Checkboxes (multple item selection) What is the area(s) of focus of the conference? Check all that apply.
 Special Event (social, educational, community service, recognition, etc) Cultural (events celebrating specific communities) Leadership (lecture series, conferences, speakers, etc) Professional Development (conference, workshop, mentoring, etc)
File Upload (8MB max) Please attach a proposal letter, addressing the following:
*Describe the focus of the conference. *Describe club/group mission and how it relates to the conference. *Describe benefit(s) applicant, participants, and the SAC community will gain as a result of the conference. (i.e group will learn leadership skills that they will also be able to give back to SAC) *Describe collaboration efforts with the SAC student body, faculty, staff, and/or SAC departmental offices. *Describe what the funding will be used for and why it is necessary. NOTE: After every conference, an event summary & participation evaluation must be completed and turned into the Student Activity Fee Committee
Budget Summary
Food [Required] Please list all expenses
Printing [Required] Please list all expenses
Decorations [Required] Please list all expenses
Facility Rental [Required] Please list all expenses
Special Equipment [Required] Please list all expenses
Lodging [Required] Please list all expenses
Speaker Fee [Required] Please list all expenses
Prizes [Required] Please list all expenses
Transportaion [Required] Please list all expenses
Registration Fees [Required] Please list all expenses

Other Expenses [Required] Please list all expenses
Total Expenses [Required] Please list all expenses
Revenue [Required] Please list all sources of income and amounts for this event/project (i.e. Admission fee, dues, donations, etc)
Fund-raisers [Required] List all fund -raiser events and amount raised
Balance/Amount requesting from Student Activity Fee [Required] Expenses - Revenue/Fund-raiser
Expenses - Revenue/Fund-raiser
Budget (8MB max) [Required] Attach an itemized Budget