

Hearing Date \_\_\_\_\_

Date of Request Submission \_\_\_\_\_

## Student Budget Allocations Committee Additional Funding Request Form

Please complete all parts of this form in its entirety and return to Student Leadership and Activities two weeks prior to the event. SBAC meets every Thursday. All forms MUST be submitted by the previous Friday by 5pm in order to be considered.

### Part A-Organization Information

Organization: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_ E-mail: \_\_\_\_\_

Event/Activity Name: \_\_\_\_\_ Event Date: \_\_\_\_\_

Description of Event: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Part B-Request

Line Item	Description/Explanation	Amount Requested	Allocation*

Total Request \$ \_\_\_\_\_

Is this a campus-wide event?    Yes    No

Is this a fundraising event?    Yes    No

*\*To be filled out by SBAC ONLY*

SBAC Approval:    Yes    No    Vote: \_\_\_\_\_    Total SBAC \$ Allocated: \_\_\_\_\_

SBAC Chair Approval: \_\_\_\_\_    Date: \_\_\_\_\_

Date Transferred: \_\_\_\_\_    By Whom: \_\_\_\_\_