

Sponsoring Club/Group: \_\_\_\_\_

Student Representative Name: \_\_\_\_\_ Student Representative Signature: \_\_\_\_\_

Sponsor Name: \_\_\_\_\_ Sponsor Signature: \_\_\_\_\_

Campus Activity Chair / Co-Chair: \_\_\_\_\_

<b>Description of Fundraiser</b>	
Purpose of Fundraiser:   	
Duration of Fundraiser: _____	Method of Fundraising: _____
Monetary Goal: _____	Target Audience: _____
Total Cost: _____ Funding provided by Club/Group: _____ Funding requested of SGA: _____	
Will the start-up funds be returned after the fundraiser? <input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Financial Management</b> <i>(All fundraising requires the use of a college agency account to handle finances)</i>
Does the club/group have an agency account? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, provide index number: _____
If no, select an option: <input type="checkbox"/> Open an agency account <input type="checkbox"/> Use a campus agency account

**\*\*If the fundraiser includes tabling or an event, please complete the following Fundraising Activity Request.\*\***

<b>Fundraising Activity Request</b> <i>(Attach itemized budget and additional documentation as directed)</i>
Activity: _____ Date(s): _____
Time(s): _____ Location(s): _____
Description of Fundraising Activity:   

**Note: If clubs/groups are requesting funds from SGA when they already have funds in an agency account, a budget breakdown must be attached explaining the intended allocation of those funds.**

\_\_\_\_\_  
Student Government Council President \_\_\_\_\_  
Date

\_\_\_\_\_  
Student Life Coordinator \_\_\_\_\_  
Date

\_\_\_\_\_  
Associate Dean of Student Life \_\_\_\_\_  
Date

\_\_\_\_\_  
Dean Of Students \_\_\_\_\_  
Date

\_\_\_\_\_  
Associate Vice President, Student Affairs \_\_\_\_\_  
Date

\_\_\_\_\_  
Vice President, Operations and Chief Financial Officer \_\_\_\_\_  
Date