Off Campus Event Budget Request Form

Student Government Association

This Office Campus Event Form is to be completed by an UF student club member and submitted to the UF Facilities Office (AMU 5) for SGA review by Tuesday at 12:00pm. This form should be submitted no later than three full weeks prior to the planned event. Each line item (i.e. Sodexo, or Prizes) must include an attached quote and design, if applicable. For assistance please email SGA@findlay.edu or speak to an SGA representative at the SGA Office (AMU 11). The SGA Constitution and Bylaws details the requirements for Off Campus Event funding in Article IX. Budget Guidelines, Section 03: Off Campus Event Board. Please see the list below for rules relating to off campus funding;

- (a) The Off Campus Event Board shall fall under the oversight of the Student Affairs Office and the Student Government Association. A limited amount of funds will be allocated to support off campus events that appear to be an appropriate and judicious use of Student Activity Fee.
- (b) No more that 15% of the funds available to the Student Government Association in a given semester may be allocated to support activities off campus. Additionally, only the Off Campus Events Board has the authority to allocate these funds.
- (c) No off campus events may be voted on at Student Government Association meetings.
- (d) The Student Government Association President, Treasurer, and Advisors will serve on the Off Campus Events Board along with members of the Student Affairs staff.
- (e) Costs associated with events held or commitments made prior to official approval by the Off Campus Events Board will not be approved for funding or reimbursement.
- (f) No funding will be approved for attendance at conferences, conference registration, travel to/from conferences, and/or hotel/housing costs associated with conferences.
- (g) No funding will be approved for hotel/housing costs for any off campus event.

Event Name:		Anticipated Attendance:		
Date of Event:	Time:		Location:	
Sponsoring Organization Name(s): _				
Requesting Student(s):				
Student Phone #:		Student E-mail:		
Organization Advisor:		Advisor Email: _		
Advisor's Approval Signature:				
Brief Event Summary:				

How does this event	support the purpose of your organization	on, and benefit the students	in attendance?	
How will this event b	e advertised and promoted to the entire	e student population?		
*If yes, please	conducted to fund this event? e attach a copy of the completed/appro-		No	
Will participants be required to pay for any of the costs? Yes No				
	Il each student be required to pay to pa	rticipate? \$	_	
What is the total cost	t of your event? \$			
What is the total cost	t you are requesting from SGA? \$			
Please detail all costs	associated with the event in the spaces	s below.		
Line Item*	Amount Requested	664 1165		
	\$	SGA USE	_	
	\$	Total Requested Amount: Amount Allocated: \$		
	\$	Date Approved:		
		Treasurer:		
	\$	Account #:		
	\$	Stipulations:		
	\$			
	\$	Date Stipulation Lifted: Comments:		
REQUESTED TOTAL	\$			

^{*}Each line item must have an attached quote to be considered for SGA funding