FLORIDA SOUTHERN COLLEGE STUDENT GOVERNMENT ASSOCIATION SENATE MONETARY FUNDS REQUEST PROPOSAL FORM

DATE:	
NAME OF ORGANIZATION:	
CONTACT PERSON/PHONE NUMBER:	
PURPOSE OF ORGANIZATION:	
WHAT ARE YOUR GOALS FOR THE COMING YE.	AR AND HOW WILL THE FUNDS REQUESTED BE USED provide a specific budget breakdown and attach additional
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DOES YOUR ORGANIZATION HAVE ANY ADDITED DESCRIBE:	IONAL FUNDING? (Dues, fundraising, etc.) IF SO, PLEASE
AMOUNT REQUESTED FOR YEARLY BUDGET	
ORGANIZATION PRESIDENT'S SIGNATURE	DATE:
DATE RECEIVED:	DATE TO BE VOTED ON:
DATE APPROVED/DENIED:	FUNDS RECEIVED:
SGA SIGNATURE/TITLE:	

Please return completed form with 25 additional photocopies to the Office of Student Activities located in the Bandshell. You will be notified after the Senate vote on how much the organization received. It is highly recommended that your organization representative be at the meeting when your proposal is voted on!