Student Government Grant Request Form

Dear Grant Seeker,

This form is for Chartered Organizations who wish to receive funding from the student activity fee. Commissioned Organizations may also use this form to request additional funding from the student activity fee beyond their annual budget. All requests must comply with the Finance policy in order to be approved. All requests will be reviewed through the Finance Committee and Student Senate as needed.

Grant Request Form Checklist

Only events open to the entire Augsburg Community will be granted funding. **One** Grant Request per event.

To ensure that funding is received on time, Grant Requests must be turned in three weeks prior to event completion.

This form must be turned in by **7 p.m. on Tuesday** to **Brittany Kruger's box in the Auggies Nest** for review on Wednesday. If it is received after Tuesday, it will be placed on the next Wednesday's agenda.

Please (if someone is available) send a representative to the Wednesday meeting of your grant request review. It will be held in the Adeline Johnson Conference Center, Oren Gateway Center at 6:30 p.m. (our alternative location is Office 1C in The Auggie's Nest).

Turn in a Grant Request Expense Report to the Stu Gov office (mail slot or mail boxes outside) within 2 weeks of event completion.

Technical Assistance:

A representative of the Student Government is available to respond to questions or request for assistance in completing this Grant Application form. Shall you require aid, call 612.330.1110 or email stugov@augsburg.edu.

Reminders:

We **do not pay the tax** for organization spending. If you don't have a tax exempt form, please contact Michael Grewe at 612-330-1499, or at grewe@augsburg.edu.

Name of Organization:			Dollar Amount		
Requested: Contact Person Number: E-Mail:	:		Phone		
Please check o	ne:				
Chartere	d				
Commissi	oned				
	<u>D</u>	ETAILED BUDGE	<u>T</u>		
ITEM COST		VENI	VENDOR		
1.					
2.					
3. 4.					
5.					
Date Funds Nee	ded (ASAP not a	cceptable):			
	EV	<u>'ENT INFORMATI</u>	<u>ON</u>		
Event Date:		Time:	Loc	ation:	
1. How many ye	ears have you do	one this before?	(Enter 0 for firs	st year)	
2. Please provic	le a 3-4 sentend	ce description of	this event:		

3. Give a brief description of the goals this event:

Grants to organizations should not exceed \$180 per person participating in the activity.

4. How do you feel this is open to the Augsburg Community?							
5. How do you plan to advertise this event?							
6. Any additional or supplementary information you would like to add?							
FUNDING SOURCES							
Co-sponsor(s) (if applicable) Contributions: Monetary Non-monetary							
** If co-sponsoring y	ou must al	so fill out a "De	claration of Co	-Sponsorship"**			
Where else have you requested funding? Source Amount Approved Declined/Undecided							
SIGNATURE AUTHORIZATION							
Organization Presider	nt / Treası	urer	Signature				

Email (Please Print) Organization Advisor Signature Email (Please Print) Treasurer/ Finance Coordinator Signature Email (Please Print) SHAPE * MERGEFORMAT **FINANCE COMMITTEE NOTES** Name of Organization: Amount Approved: Date Approved:_____ Event Title: _____

Senate Treasurer/ Finance Coordinator:

Account #: _____