

Name of Organization \_\_\_\_\_

Questions Concerning Organization

Please answer the following questions as completely and accurately as possible. The responses to these questions will be considered in allocating budgets.

- 1.) How many individuals are directly involved in your organizations at the present time?**
  
- 2.) How many students are affected by your organization?**
  
- 3.) Does your organization receive funding from any other sources, including fundraising? If yes, how much money has been received?**
  
- 4.) Does your organization currently have an off-campus cash account?**
  
- 5.) What are some of your organization's major events throughout the year?**

Officers of your Organization

**Officer Title:** \_\_\_\_\_

Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Officer Title:** \_\_\_\_\_

Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Officer Title:** \_\_\_\_\_

Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Officer Title:** \_\_\_\_\_

Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Officer Title:** \_\_\_\_\_

Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

