

**DO NOT EDIT IN PREVIEW FOR MAC**

Organization Name: \_\_\_\_\_ SOAS ACCOUNT#:C/U \_\_\_\_\_

**STUDENT ORGANIZATION FUNDING COMMISSION  
FOR WINTER 2014**

*A SERVICE OF THE CENTRAL STUDENT GOVERNMENT*

**If you have any questions or concerns, please contact the appropriate Commission Chair via the group e-mail or visit CSG during their indicated office hours:**

SOFC Chair	Alex Abdun-Nabi, <a href="mailto:funding.csg@umich.edu">funding.csg@umich.edu</a>
SOFC Chair	Skylar Pursell, <a href="mailto:funding.csg@umich.edu">funding.csg@umich.edu</a>
SOFC Chair	Laurel Ruza, <a href="mailto:funding.csg@umich.edu">funding.csg@umich.edu</a>
SOFC Secretary	Kevin Ziegler, <a href="mailto:funding.csg@umich.edu">funding.csg@umich.edu</a>
CSG Treasurer	Eric Kibler, <a href="mailto:funding.csg@umich.edu">funding.csg@umich.edu</a>

**All office hours will be held in the CSG Office (3909 Michigan Union) and are listed on the CSG website under the "Funding" tab.**

Receipts must be dated after **December 17<sup>th</sup>** and the date of the receipt deadline that corresponds to the wave in which you applied for funding.  
**Receipt Deadline A: March 10, 2014**  
**Receipt Deadline B: April 21, 2014**

Deadline for receipt extension forms for Receipt Deadline A: **February 24<sup>th</sup>**

**SOAS HAS CHANGED THEIR POLICY REGARDING UNIVERSITY INTERNAL PAYMENTS, SUCH AS ROOM RESERVATIONS; PLEASE CONTACT SOAS IN REGARDS TO ATTAINING YOUR FUNDS FROM SOAS ONCE YOU HAVE BEEN REIMBURSED BY SOFC.**

**WAVE APPLICATION DEADLINES**

A1: January 31<sup>st</sup>  
A2: February 7<sup>th</sup>  
A3: February 14<sup>th</sup>  
A4: February 21<sup>st</sup>  
**A Receipts: March 10<sup>th</sup>**

B1: March 14<sup>th</sup>  
B2: March 21<sup>st</sup>  
B3: March 28<sup>th</sup>  
B4: April 4<sup>th</sup>  
B5: April 11<sup>th</sup>  
**B Receipts: April 21<sup>st</sup>**

**Advanced Funding  
Deadline: March 31<sup>st</sup>**

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## THE ROLLING FUNDING PROCESS

### APPLICATIONS:

#### *"Initial Funding Application" (IFA):*

The first time that an organization applies for funding during the semester, they must complete the IFA assignment on CTools or submit a hard copy available in the CSG Office. The IFA details the organization background and details, financial information, and event descriptions. An organization is required to update this description if there are significant changes to the organization (such as contact information, mission statement changes, or significant member fluctuation, etc.) by submitting a new IFA.

#### *"Supplemental Wave Application" (SWA):*

After an organization completes the IFA for the semester, the subsequent requests throughout the semester will be through the Supplemental Wave Application. The SWA only includes the financial information and event descriptions for the requested SOFC funding.

**Note: Financial information, regardless of whether or not it has changed from the previous wave, is ALWAYS required.**

### I. Rolling Funding Events & Waves

- Rolling funding is designed to give groups more opportunities to apply and potentially receive funding on a weekly basis.
- Applications will be due each week on **Friday at 12:00 PM both by online submission or by CSG Front Office submission.**
- Please only apply when costs, dates, and locations are known and events finalized.
- All applications are reviewed according to the same criteria regardless of wave submitted
- You **CANNOT** apply for the same costs of an event if denied funding on that item in any previous waves within a funding semester.
  - For example: If Room Rental is \$1000, you may apply for the full \$1000 to SOFC Wave 1. If denied funding on that item, you **CANNOT** apply for the full \$1000 in subsequent SOFC Waves.
- Also, you **CANNOT** apply for the same costs of an event over different waves.
  - For example: If Room Rental is \$1000, you may apply for \$500 in Wave 1 and the remaining \$500 in Wave 2. However, you **CANNOT** apply for \$1000 in Wave 1 and \$1000 in Wave 2.
- **DO NOT** alter the formatting of the application. If you need more space, it is recommended to attach additional documentation.
- We strongly encourage you to review your application with a funding chair during office hours or email a chair to request a more convenient time to meet.
- All student organizations should make copies of their own applications for their records.

### II. Reviews & Appeals

- SOFC has weekly reviews and appeals. Each wave is composed of a pre-determined Application Deadline, Review, and Appeal.

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- Following review of the application by the SOFC Reviews Board, the primary contact person listed will be notified of the determined award amount via e-mail within approximately 2 days of the review of the application.
- After receiving notification of the award decision by the Reviews Board, a student group has the option to appeal to the SOFC Appeals Board. Appeals for SOFC are interviews conducted in person at the CSG Office.
- If you would like to appeal, please come into the CSG Office front desk during regular CSG Office hours, and sign up for an Appeals interview by 5:00pm the Friday after receiving your award notification.
- If you are late or miss your scheduled interview, it is the discretion of the chairs to determine whether or not you will be granted a make-up interview.
- It is the responsibility of the student organization to know its award amount for each wave.
- *All SOFC Appeals interview sign-ups will be held in the CSG Office (3909 Michigan Union) before the date specified.*
- **Please bring a copy of your application to all interviews. The CSG Office will not make copies of your application.**

### III. SOFC Reimbursements

- **SOFC operates through a reimbursement process only. Reimbursement refers to a student organization paying for their event expenses, and if awarded through SOFC, that organization will be reimbursed for the expense by submitting copies of proper receipts and payment verification to the SOFC.**
- Original receipts must be taken to the SOAS Office.
- It is the policy of SOFC to reimburse a student organization's expenses for a given event after an award decision and receipt submission.
- **IMPORTANT:** Once an organization receives an award notification, the organization has **until the corresponding receipt deadline (A, B, or C)** to turn in receipts for reimbursement.
- Photocopied receipts **MUST BE** turned in by **the corresponding receipt deadline**, and must be dated between December 17th and said (A, B, or C) deadline.
- Submit **photocopies** of the receipts to the CSG Office, during regular Office hours, with a Reimbursement Request Form (available in the CSG Office), whereupon, pending review, funds will be transferred to your organization's SOAS account.
- Photocopies cannot be made in the CSG Office, so please have all materials ready beforehand.
- The Reimbursement Request Form includes a receipt from the CSG Office – **please keep this for verification purposes.**
- If your organization finds issues with your award transfer, please contact [funding.csg@umich.edu](mailto:funding.csg@umich.edu).
- In order for a student group to be reimbursed for services rendered by an individual, (e.g., an Honorarium, D.J., dance group, photographer, clown, etc.) please provide a copy of the Services Rendered form submitted to SOAS (available in the SOAS Office) along with your funding application. A copy of your organization's SOAS account statement will also be required to accompany the copy of the Services Rendered form to verify payment was made for services through your organization's SOAS account.

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- SOFC CANNOT AND WILL NOT reimburse cash payments of any kind, without an official, itemized receipt, bank account statement, or official paid invoice.

### IV. SOAS Reimbursement

After funds have been transferred from CSG, take all **original** receipts to the SOAS Office. Once the CSG awarded funds have been transferred to your student organization SOAS account. CSG has no authority over those funds and your organization will have full authority over the funding. Any questions or issues your organization has regarding its own SOAS account must be discussed directly with SOAS, <http://studentorgs.umich.edu/soas>.

### V. SOFC Receipt Deadline Extension

- If a student organization believes they CANNOT provide receipts by the correct receipt deadline, the organization should complete and submit the SOFC Receipt Deadline Extension form. Submit this form to CSG Office during regular Office hours.
- An extension may be granted under specific fiscal circumstances. It is under the discretion of the SOFC chairs to grant an extension for any group.
- Please note: Receipt Deadline Extension Forms will NOT be processed or considered until AFTER the organization has received an award notification during the normal reviews and appeals process.

### VI. Advance Funding Requests

Under very extreme circumstances, SOFC may consider Advance Funding Requests. If you are in need of this consideration please provide the following documentation:

1. The SOFC Advance Funding Request Form (available in the CSG Front Office).
2. Print out of a **CURRENT** SOAS Account.
3. Invoice/documentation of the expense(s) you are requesting advance funding for.

Submit the above documentation to the CSG Front Office (3909 Michigan Union) during regular business hours.

Please be aware that considerations for advance funding are at the discretion of the SOFC funding chairs and the CSG Treasurer. Submission of advance funding request documentation does not guarantee allocation.

Please also be aware that in order to properly submit an advanced funding request, the student group must have already submitted a SOFC application PRIOR to the advanced funding request.

- **Final Date to apply for Advanced Funding for Winter Term 2014 is March 31, 2014. No advanced funding will be approved after this date.**

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### VII. Advance Funding Timeline Request Documentation Deadline:

*A group has 10 calendar days after a given wave's Appeal date (whether appealing the award decision or not) to file the aforementioned paperwork requesting advance funding consideration. Advanced Funding is at the discretion of the funding chairs.*

Proof of Payment Submission Deadline and Repercussions:

- If the advanced funding request has been granted, the group has **10 calendar days** after SOFC has transferred the pertinent funds to their SOAS Account to submit some form of proof of payment for the requested expense(s).
- **WARNING: Failure to submit proof of payment shall result in the following actions:**
  - SOAS Account freeze
  - Indefinite prohibition from applying to SOFC
- These restrictions will be lifted upon proof of payment submission.

## GUIDELINES FOR REQUESTING FUNDING

To be eligible for funding your student organization must:

- 1) Be officially UM recognized through the SOAR process (<https://uuis.umich.edu/cosign/soar/>) or (<http://maizepages.umich.edu/>)
- 2) Have a valid and active SOAS account
- 3) Two authorized signers for their application

The Student Organization Funding Commission is charged with allocating funding in a rigorous, neutral, and fair manner. Thus, writing a detailed and precise application will allow SOFC to accurately evaluate the financial circumstances of your organization and make a proper decision. Since funding is limited, SOFC prefers to support organized groups with well-planned events.

Consideration for funding is often based upon the following criteria:

- Breadth: the number of students affected
- Depth: the degree of effect on students
- Impact on the campus and general Michigan community at large
- Effort to receive funding from other sources
- Unique nature of the event
- Completeness of the funding application
- Prior use of SOFC funding allocations
- Reasonable, detailed, and itemized budget
- Sensible timeline
- Financial need
- Direct or Indirect community service
- Community organization or development
- Social action
- Education

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### SOFC Mileage Policy

To be reimbursed for gas mileage, you must attach all three of the following items to your Reimbursement Request:

- The gas receipts.
- A printout of your starting and ending location that states the number of miles you have traveled (we suggest using a service such as Google Maps or MapQuest).
- A Mileage Reimbursement Form (available in the CSG Office) stating the purpose of your travel, the mathematical calculations for your total reimbursement, and the signatures of three authorized signers of your organization (see form for details).
- Each organization will be reimbursed based on Mileage Policy, but gas receipts are required as proof of payment for SOFC purposes.

### Funding Restrictions

It is *generally* the policy of SOFC NOT to fund the following:

- **Capital goods (products able to be reused following the event)**
- **T-shirts**
- **Food and drink**
- **Decorations and Prizes**

\*\*\*To request an exception to fund any of the above items, please respond to questions 6-10 in the Events Description section of the application. If you request any of these items *without* completing this section, SOFC CANNOT consider that cost. Please keep in mind however that responding to the aforementioned questions does not guarantee funding – **exceptions are granted by a two-thirds vote of the body**. Such decisions are only legitimately considered when organizations can prove that the cost of the requested item(s) or service(s) are **integral** to the event.

**It is the strict policy of SOFC to NEVER fund the following under ANY circumstances:**

- **Student salaries**
- **Club Sports fee charged by the Athletic Department**
- **Awards, gifts, and gift certificates**
- **Newspaper advertisements**
- **Winterfest and Festifall registration fees**

### SOFC EVENT ADVERTISING POLICY

SOFC requires organizations that receive funding to include the phrase "Funded by the Student Organization Funding Commission of UM Central Student Government", on a flier, t-shirt, or publication that is distributed for the event. **Violations of this guideline may result in student organizations losing their ability to request funding in the future.**

**\*\*\*Please include a draft version of the publications or t-shirt design with the added phrase to your application so that SOFC may ensure your group's adherence to this advertising policy.**

Any questions regarding the Event Advertising Policy should be directed to the funding chairs or the CSG Treasurer.

Please take a few seconds to:

1. Like the CSG Facebook page: [www.facebook.com/UmCsg](http://www.facebook.com/UmCsg)
2. Like the CSG Twitter page: [www.twitter.com/UmCsg](http://www.twitter.com/UmCsg)

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**CSG Winter 2014 Funding Application**

**INITIAL FUNDING APPLICATION**

*Please select the correct wave →*

**If you have any questions or comments regarding this application, please contact a SOFC Chair:  
*funding.csg@umich.edu***

- Wave A1
- Wave A2
- Wave A3
- Wave A4
- Wave B1
- Wave B2
- Wave B3
- Wave B4
- Wave B5

**Contact Information**

Organization Name: \_\_\_\_\_

SOAS Account: \_\_\_\_\_ UM Registered: YES NO

\*If you are a registered non-profit organization in any US state please provide your:

EIN Number: \_\_\_\_\_

Primary Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone\*: \_\_\_\_\_

*\*Please be available from 9-5 on the day of reviews if the funding body needs to contact you to clarify your application.*

Secondary Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

**For SOFC Use Only**

**R** \_\_\_\_\_ **I** \_\_\_\_\_ **A** \_\_\_\_\_

Rst/Evt: \_\_\_\_\_

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**Organizational Information**

Please select any of the following that describe your organization:

<input type="checkbox"/> Academic/Professional	<input type="checkbox"/> Greek (Fraternity/Sorority)
<input type="checkbox"/> Athletic/Recreational	<input type="checkbox"/> Honorary
<input type="checkbox"/> Creative Arts/Expression (Visual, Performance and/or Exhibition)	<input type="checkbox"/> House Council
<input type="checkbox"/> Community Service	<input type="checkbox"/> Cultural/Ethnic
<input type="checkbox"/> Environmental	<input type="checkbox"/> Political
<input type="checkbox"/> Graduate	<input type="checkbox"/> Publications/Journalism
<input type="checkbox"/> International	<input type="checkbox"/> Religious
<input type="checkbox"/> Science/Technical	<input type="checkbox"/> Social Justice

**Describe the overall purpose/mission of your organization and the planned initiatives and activities intended to uphold said objective(s).**

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**No. of active student members:** \_\_\_\_\_ **No. on group e-mail list:** \_\_\_\_\_

**Avg. attendance at group meetings:** *(Executive Board meetings, committee meetings, event planning meetings, etc)* \_\_\_\_\_

**Average attendance at events:** *(Note: If new organization, please project event attendance at future programs. If organization is not involved in event planning, please write "N/A")* \_\_\_\_\_



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**Do all of your activities/events take place on campus? If yes, where do you prefer to hold your programs? If not, where else do they take place?**

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**Does your group work with any University department or other student organizations in any capacity? If so, please describe this collaboration.**

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**Is your group affiliated with a national, parent, and/or umbrella organization? If so, please describe this relationship and how it plays a role in your organization's functioning.**

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## FINANCIAL INFORMATION

*PLEASE FILL OUT ALL OF THE FOLLOWING INFORMATION CLEARLY*

If there is any further information that may provide us a more complete financial picture of your organization, please attach it to the end of this application. This especially applies to club / recreational sports or groups with exceptionally large budgets. **Adding your own budget cannot replace this form. It can only be used as supplementary documentation to clarify the above information.**

<b>Section 1 - Account Balances</b>		
Please list the balance of any and all SOAS accounts your group accesses. Also include the balances of any external, commercial bank accounts your group holds (e.g. TCF Bank, Comerica Bank, etc.)		
Include rec sports account, if applicable. DO NOT INCLUDE DF ACCOUNTS.		
	<b>Account Location (SOAS Number/Bank Name)</b>	<b>Balance</b>
	SOAS	\$
		\$
		\$
	<b>Total Account Balance (sum of above columns)</b>	<b>\$</b>
<b>Section 2 – Funding Received and/or Raised</b>		
Please identify ANY other funding (excluding membership dues) that your group has already received/raised or is <b>GUARANTEED</b> to receive at some point over the semester. These sources could include other U-M funding bodies (SOFC, LSA-SG Budget Allocations Committee, departmental grants, etc.), external donations, national organization allocations, etc.		
	<b>Funding Source</b>	<b>Expected Amount</b>
		\$
		\$
		\$
	<b>Total Expected Funding (sum of above columns)</b>	<b>\$</b>
<b>Section 3 – Funding Pending</b>		
Please estimate ANY other pending funding (excluding membership dues) that your group could <b>POSSIBLY</b> receive at some point over the semester. These sources could include other U-M funding bodies (SOFC, LSA-SG Budget Allocations Committee, departmental grants, etc.), external donations, national organization allocations, etc.		
	<b>Funding Source</b>	<b>Expected Amount</b>
		\$
		\$
		\$
	<b>Total Pending Funding (sum of above columns)</b>	<b>\$</b>
<b>Section 4 – Dues</b>		
Please estimate all dues that are not reflected in any of your bank accounts at the time of filling out this application. Leave blank if dues have already been added to your accounts.		
	Expected Number of Dues-Paying Members	(1)
	Dues Charged Per Member	(2) \$
	<b>Total Dues Revenue (Field (1) x Field (2))</b>	<b>\$</b>

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<b>Section 5 – Admissions Revenue</b>		
Please estimate the revenue your group will accrue from the event(s) you are applying for. Please use the prescribed formula below.		
Event #[ ]	Expected Number of Participants	(1)
	Admissions Charged Per Person	(2) \$
	Percentage of Revenue Donated to Charity (round to nearest decimal)	(3) 0._
	Admissions Revenue for Event #[ ] (Field (1) x Field (2)) x (1 – Field (3))	(4) \$
Event #[ ]	Expected Number of Participants	(5)
	Admissions Charged Per Person	(6) \$
	Percentage of Revenue Donated to Charity (round to nearest decimal)	(7) 0._
	Admissions Revenue for Event #[ ] (Field (1) x Field (2)) x (1 – Field (3))	(8) \$
	<b>Total Admissions Revenue for all Events (Field (4) + Field (8))</b>	<b>\$</b>

<b>Section 6 – Debt &amp; Liabilities</b>		
Please identify all pre-existing debts or liabilities your group currently holds. This includes <i>all</i> expenses incurred <i>thus far</i> which cannot be put to use this academic term.		
	<b>Debt / Liability Description</b>	<b>Amount</b>
		\$
		\$
		\$
	<b>Total Debt \$ Liabilities</b>	<b>\$</b>

<b>Section 7 – Projected Expenses</b>		
Please identify all reasonable projected expenses for your group this academic term. This includes any <b>future costs</b> , events, etc., you have <b>OTHER THAN those expenses for which you are applying</b> . <b>**For each projected expense please attach supplementary documentation detailing the legitimacy of this forecasted amount (i.e. expense calculation, past budgets/expenditures, etc.)</b>		
	<b>Projected Expenses Description</b>	<b>Amount</b>
		\$
		\$
		\$
	<b>Total Projected Expenses</b>	<b>\$</b>

<b>Cash Flow Summary</b>		
Please copy the values from the above worksheet to create your cash flow summary.		
	Total Account Balances (section 1)	\$
	Total Expected Funding (section 2)	\$
	Total Dues Revenue (section 4)	\$
	Total Admissions Revenue (section 5)	\$
	--MINUS--	
	Total Debt & Liabilities (section 6)	\$
	Total Projected Expenses (section 7)	\$
	<b>Cash Flow</b>	<b>\$</b>

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**EVENT DESCRIPTION NO. [\_\_\_\_]**

*Complete this page for each event. If you are holding a series of similar events, e.g., weekly speakers or meetings, list it as one event.*

Event name: \_\_\_\_\_

Event date(s): \_\_\_\_\_ Event location: \_\_\_\_\_

1. Briefly describe this event. What is its overall purpose?

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2. Describe how this event will impact our campus and the student body.

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3. If applicable, please describe how the program fulfills one of SOFC'S missions, e.g., community service, education, leadership development, and social action.

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4. Describe how your events will include other groups or departments.

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5. Which other groups or departments are you sponsoring this event with?\*

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6. If your organization is traveling, please explain why this is integral to your event and how it will impact the UM community.\*\*

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7. If your organization is purchasing food, please explain why this is integral to your event and how it will impact the UM community.

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8. If your organization is purchasing apparel, please explain why this is integral to your event and how it will impact the UM community.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. If your organization is bringing a speaker, performer, DJ, photographer (or any other paid individual for services rendered), please explain why this is integral to your event and how it will impact the UM community. Additionally, attach a short biography to the end of this application. \*\*\*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. If your organization is applying for capital goods (anything that can be reused after the event has taken place) please explain why it is integral to the event.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. How many participants do you expect? \_\_\_\_\_

12. Will you charge admission?        YES        NO

- If so, how much (per person)? \_\_\_\_\_
- Will this be donated to charity? \_\_\_\_\_
  - What percentage will be donated? \_\_\_\_\_

13. Who is eligible to participate? \_\_\_\_\_

14. Are your date(s) and location (s) confirmed?        YES        NO

\* If you are cosponsoring this event with other groups, you can split up costs, but they may not overlap.

\*\*Please refer to our Mileage Policy on page 4

\*\*\*Please refer to our PeoplePay policy on page 3

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**BUDGET FOR EVENT NO. [\_\_\_\_]**

*Please fill out this form for each corresponding event description page. List ALL expenses. Please use the notes sections below to explain any costs in greater detail.*

<b>Category:</b>	<b>Total Cost:</b>	<b>Amount Requested From SOFC:</b>	<b>Rank:</b>
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**Advertising & Publicity**

*We **strongly recommend** that you attach a copy of all posters/flyers to the end of this application.*

- |                  |          |          |       |
|------------------|----------|----------|-------|
| • Posters/Flyers | \$ _____ | \$ _____ | _____ |
| • Other: _____   | \$ _____ | \$ _____ | _____ |

Notes: \_\_\_\_\_

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**Operations**

- Office Supplies (please specify)

- |         |          |          |       |
|---------|----------|----------|-------|
| _____   | \$ _____ | \$ _____ | _____ |
| • _____ | \$ _____ | \$ _____ | _____ |

Notes: \_\_\_\_\_

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**Printing & Publications**

\$ _____	\$ _____	_____
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*We **require** that you attach a copy of all publications to the end of this application.*

**Facilities Rental**

- Equipment (please specify)

- |               |          |          |       |
|---------------|----------|----------|-------|
| _____         | \$ _____ | \$ _____ | _____ |
| • _____       | \$ _____ | \$ _____ | _____ |
| • Room Rental | \$ _____ | \$ _____ | _____ |

Notes: \_\_\_\_\_

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**Services**

- |                      |          |          |       |
|----------------------|----------|----------|-------|
| • Speaker Honorarium | \$ _____ | \$ _____ | _____ |
| • Speaker Travel     | \$ _____ | \$ _____ | _____ |
| • Speaker Lodging    | \$ _____ | \$ _____ | _____ |
| • Other: _____       | \$ _____ | \$ _____ | _____ |

**Student Travel**

- |                  |          |          |       |
|------------------|----------|----------|-------|
| • Lodging        | \$ _____ | \$ _____ | _____ |
| • Transportation | \$ _____ | \$ _____ | _____ |
| • Vehicle Rental | \$ _____ | \$ _____ | _____ |

**Capital Goods**

- |                      |          |          |       |
|----------------------|----------|----------|-------|
| • T-Shirts           | \$ _____ | \$ _____ | _____ |
| • Computer/Equipment | \$ _____ | \$ _____ | _____ |

<b>Food</b> _____	\$ _____	\$ _____	_____
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<b>Other:</b> _____	\$ _____	\$ _____	_____
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<b>TOTAL EXPENSES</b>	<b>\$ _____</b>	<b>\$ _____</b>	_____
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**SUMMARY OF REQUESTS**

	<b>Total Expenses</b>	<b>Amount Requested From SOFC</b>
<b>Event #1</b>	\$ _____	\$ _____
<b>Event #2</b>	\$ _____	\$ _____
<b>Event #3</b>	\$ _____	\$ _____
<b>Event #4</b>	\$ _____	\$ _____
<b>Event #5</b>	\$ _____	\$ _____
<b>Event #6</b>	\$ _____	\$ _____
<b>TOTAL</b>	\$ _____	\$ _____

**REMINDER:**

**\*\*Please remember to attach a mock-up version of the publication or T-shirt design with the added CSG Logo or "Funded by the Student Organization Funding Commission of the UM Central Student Government" statement to your application (see page 5 for Advertising Policy)**

Like the CSG Facebook page: [www.facebook.com/UmCsg](http://www.facebook.com/UmCsg)

Like the CSG Twitter page: [www.twitter.com/UmCsg](http://www.twitter.com/UmCsg)

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*Optional*

**Suggestions for improving our funding process:**

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Organization Name: \_\_\_\_\_ SOAS ACCOUNT#:C/U \_\_\_\_\_

**Central Student Government: Student Organization Funding Commission  
Grant Agreement, Winter 2014**

In consideration of their mutual promises and agreements:

**Contingent upon the award of funds in the Winter Term of 2014 by the Central Student Government (CSG) of the University of Michigan, the Recipient agrees:**

- 1. To use the allocation *exclusively for activities previously presented to and approved* by CSG. No funding shall be provided for capital goods, t-shirts, newspaper ads, gas, Club Sports fees, food or beverages, student airline travel, student lodging, awards, gifts, gift certificates, film, or film processing. *Exceptions* to these conditions *must be pre-arranged, in writing* with the funding chairs as appropriate.
- 2. Date Limitations

Receipts must be dated after **December 17<sup>th</sup>** and the date of the receipt deadline that corresponds to the wave in which you applied for funding.  
**Receipt Deadline A: March 10, 2014**  
**Receipt Deadline B: April 21, 2014**

- 3. Recipient permits CSG or CSG's agents to access records in Student Organization Accounting Services which evidence Recipient's financial transactions - regarding the sum granted by SOFC.
- 4. Recipient affirms that all statements made regarding its funding request are true and correct to the best knowledge of the undersigned representatives.
- 6. If **(1)** any of the provisions of this agreement are violated by Recipient, **(2)** if any of the statements of the allocation request are untrue, or **(3)** if any of the allocated funds are used in a manner on an activity not previously approved by the CSG, Recipient agrees to return, upon CSG'S request, an amount equal to the full amount of the grant. CSG additionally holds the right to revoke any unused funds according to the aforementioned conditions. This shall not be construed to limit the right of CSG to recover any additional sum that it is entitled to pursue through legal or administrative processes.
- 7. Recipient agrees that failure to comply with the terms of this agreement - in any regard - may subject Recipient and/or its members to **(1)** full repayment of the grant, **(2)** civil liabilities, and **(3)** sanctions by the CSG in accordance with its powers and operating procedures.
- 8. By signing below, Recipient acknowledges receipt of CSG's "SOFC Funding Form"
- 9. Statement of Guarantee:

We, the undersigned parties, agree that (1) should Recipient become liable to the CSG for repayment of any of the funds granted and (2) should the Recipient fail to repay the funds for which it is liable, we will personally pay to the CSG any unfulfilled debts on demand.

The below-signed representatives have read and understand this agreement; at least ONE signer must be an SOAS Authorized Signer:

Name (Authorized SOAS Signer for Group)	Position	Date
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Name (Group Member, different than above)	Position	Date
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