Florida Southern College Student Government Association Special Events Budget Funds Request Proposal Form

Organization:	
President:	Contact Number:
President's Signature:	Date:
Advisor:	Contact Number:
Advisor's Signature:	Date:
Purpose of Organization:	
Anticipated Total Cost of Organizat	ion Event:
Amount Requested:	
-	Please provide a specific budget breakdown and attach additional [1]
What are your goals for the coming student body?	year, and how will the funds requested be used to benefit the
Does your organization have any ad	Iditional funding? [Dues, fundraising, etc.]. If so, please describe:
Date of event:	I ocation:
	Number of People in Organization:
	vide event [please attach a copy of this PR material]:
Describe intended I K for eampus-w	ide event [please attach a copy of this FK material].
This form must be stamped and ini	tialed by the Office of Student Activities Secretary and
placed in the mailbox of the V.P. o	
For Office Use Only:	
•	ance Mailbox (with initials):
Date voted on:	
Amount Allocated:	
V.P. Finance Signature:	