



Budget Proposal

Please return to the director of student programs in the Freshman Center

Organization Name: _____

Student Leader Submitting Request: _____

Phone: _____ Pipeline E-mail: _____

Today's date: _____ Academic year (YYYY to YYYY) _____

Operating Expenses

Office Supplies	\$ _____
Postage	\$ _____
Programming	\$ _____
Other	\$ _____

A Total \$ _____

Special Activities (Itemize each activity. Attach additional sheet as necessary.)

1. _____

Advertising	\$ _____
Transportation	\$ _____
Programming	\$ _____
Other	\$ _____

B Total \$ _____

2. _____

Advertising	\$ _____
Transportation	\$ _____
Programming	\$ _____
Other	\$ _____

C Total \$ _____

Workshops/Conferences

1. _____

Registration fees	\$ _____
Transportation fees	\$ _____

2. _____

Registration fees	\$ _____
Transportation fees	\$ _____

D Total \$ _____

(E) Total Budget Proposal (Total of A-D)	Total \$ _____
(F) Less Cash on Hand (Please include bank statement)	\$ _____
(G) Less amount anticipated from fundraisers	\$ _____

Total Budget Requested (E minus F and G) Total \$ _____

Student Activities Use Only

Date _____

Total Amount Allocated _____