Student Government Association
Application for Funding 2017-2018

Read all instructions/guidelines before completing your request. Completed forms may be submitted to UC414 at least three weeks prior to your event. Be aware that SGA funding is meant to supplement existing funding and not be the primary source of funding for any event.

Fund:
Please mark which fund you are applying for:

___ Discretionary Fund
___ Student Organizations Fund

Organization Basics:
Organization name: ____________________________________________
Student Membership: _____ Total Membership: ______
Description/Purpose of Organization:
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
Does your organization have a website? If yes, provide the link.
________________________________________________________________________________

Event Information:
What is the name of your event/program? ____________________________
Date of event: ______________ Location of event: _______________________
Describe the purpose, goals and objectives of the event:
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

If you have any questions, please contact Luke LeGrand at sgtreasurer@semo.edu or (573) 837-3925
What fundraising or what other sources of funding has your organization acquired? Please include specific amounts raised/received.

__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
What do you expect this event to bring to Southeast’s campus and community?

__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
What type of advertising will be done for this event? (Please attach copies if applicable)

__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

Additional Information:

Please attach the additional information needed for the account applying for:

For Discretionary Applications:

- Itemized Budget (Be as specific as possible. Each item must be listed along with price.)
- Discretionary Funding Agreement (Attached)
- Travel Itineraries and Conference Information (if applicable)

For Student Organization Applications:

- Itemized Budget (Be as specific as possible. Each item must be listed along with price.)
- Advertising Example

If you have any questions, please contact Luke LeGrand at sgtreasurer@semo.edu or (573) 837-3925
Contact Information:

President’s name: ___________________  S0#____________________
Phone number: _______________  Email address: ______________________

Treasurer’s name: ___________________  S0#____________________
Phone number: _______________  Email address: ______________________

Individual Preparing the Budget: ___________________  S0#____________________
Phone number: _______________  Email address: ______________________

Faculty Advisor: ___________________
Phone number: _______________  Email address: ______________________

Signatures:

I, ________________________________, acting as an authorized representative for my organization, understand that my organization must comply with the Student Government Constitution, By-laws and Policies for all funds received through Student Government. I hereby attest that the rules/policies have been read and understood. I have presented all information truthfully and completely to the best of the organization’s ability.

________________________________________
Student Organization

________________________________________
Organization President  Organization Advisor  Organization Treasurer

If you have any questions, please contact Luke LeGrand at sgtreasurer@semo.edu or (573) 837-3925