

Instructions: Complete this form and turn in to the ASB Room. Attach additional information as necessary in order to best represent your request.

**funding
request**



ASB's goal for funding requests is to provide financial assistance to student clubs that demonstrate a specific need and that will use the funds for purposes that have the potential of benefitting the entire student body.

Name of Club: _____ Advisor: _____

Amount of request: \$ _____ Date funding needed: _____

Purpose of Request: _____

What have you done to raise funds so far: _____

How will you encourage students to get involved in your club: _____

How will these funds be used to potentially benefit the entire student body: _____

If your club will use the funds for a paid event or fundraiser, will a discount be given to students who have purchased an ASB card? [] Yes: \$ _____ [] No

TO BE FILLED OUT DURING THE ASB STUDENT COUNCIL MEETING

Meeting Date: _____

ASB Class Decision: [] Approved
[] Approved* Revised amount: \$ _____
[] Denied*

*Reason: _____

Executive Council's Approval Signature: _____

ASB Director's Approval Signature: _____