

Student Group Event

FUNDING REQUEST

Student Group Information:

Sponsoring Student Group: _____

Address: _____ Phone #: _____

Number of student members: _____ Number of non-student members: _____

Does your group have an account with the Student Organizations Finance Office? Yes _____ No _____

Approval by Authorized Student Group Signer: _____

NOTE: In order to be considered for funding, most funding sources require that a student group have an account in good standing with the Student Organizations Finance Office *prior* to being considered for funding. Also, when meeting with the SOFO events coordinator, **please provide printed verification that the facility/ space is reserved for all events.**

Event Information:

Title of Event: _____

Performer(s) Name(s): _____

Date: _____ Time: _____

Place: _____ Is the space reserved? Yes _____ No _____

Facility Capacity: _____ Projected Attendance: _____

Event Format: Lecture _____ Performance _____ Workshop _____ Conference _____

Other: _____

Event Contact Information: (All event signers/ contacts must be fee-paying students)

Authorized Signer/Primary Event Contact: _____

Student Number: _____

Address: _____ City _____ Zip _____

Home #: _____ Cell #: _____ Univ. E-Mail: _____

Additional Event Contact: _____

Student Number: _____

Address: _____ City _____ Zip _____

Home #: _____ Cell #: _____ Univ. E-Mail: _____

NOTE: Only 2 authorized signers are allowed per student group event account. In some cases, the second signer will be the CEB Chair (on CEB events only). All event signers must possess the knowledge necessary to act as the main contact person(s) for the event and must attend the event planning meeting before any spending is done.

07/08

EVENT PROPOSAL BUDGET

Student Group: _____ Today's Date: _____ Funding Deadline: _____
 Event: _____ Description: _____
 Place: _____ Time: _____ Date: _____

BUDGET

Advertising(non-printing)\$ _____
 Buff Bulletin/E-Memo \$ _____
 Contracts Business \$ _____
 Contracts Individual \$ _____
 Copies/Printing \$ _____
 Equipment Rental \$ _____
 Facility Rental/Set Up \$ _____
 Federal Express \$ _____
 Film/Video Services \$ _____
 Film/Video Supplies \$ _____
 Guest Air \$ _____
 Guest Lodging \$ _____
 Guest Meals \$ _____
 Fees/Licenses \$ _____
 Parking Operations \$ _____
 Postage \$ _____
 Props/Costumes \$ _____
 Reception/Other Food \$ _____
 Security/Police \$ _____
 Vehicle Rental \$ _____
 Other \$ _____
 Other \$ _____
 Other \$ _____
 SUBTOTAL: \$ _____
 GAR/GIR (5.90%) \$ _____
 TOTAL \$ _____

ANTICIPATED FUNDING SOURCES:

Indicate: { Applied / Expected / Committed }
 { A / E / C } _____ \$ _____
 { A / E / C } _____ \$ _____
 { A / E / C } _____ \$ _____
 { A / E / C } _____ \$ _____
 { A / E / C } _____ \$ _____
 TOTAL = \$ _____

CONTRACT DETAILS: (Who & How Much?)

_____ \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 TOTAL = \$ _____

ADVERTISING DETAILS: (Publications, # of Ads, Price)

_____ # _____ \$ _____
 _____ # _____ \$ _____
 _____ # _____ \$ _____
 TOTAL = \$ _____

AIRFARE DETAILS (Who, where)

_____ \$ _____
 _____ \$ _____
 _____ \$ _____
 TOTAL = \$ _____

Event Contact Person: _____
 Work Phone #: _____ Home Phone #: _____
 E-Mail Address: _____

This budget must be signed by the events coordinator in SOFO, UMC 231.

SOFO REVIEW AND APPROVAL: _____ DATE: _____

Guest Lodging Details

(Name / speaker or performer X # of nights & price)

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL =	\$ _____

Guest Meals Details

(Name / speaker or performer X # of days & price)

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL =	\$ _____

Facility Rental/ Set Up Details

(Item (chairs, tables, etc.) X # & price)

_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL =	\$ _____

Police Details

#of police X # of hours X \$ per hour

_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL =	\$ _____

Facility Security Details

(# of guards X # of hours X \$ per hour)

_____	\$ _____
_____	\$ _____
TOTAL =	\$ _____

Equipment Details (not provided by venue)

(Item (sound system, lighting, etc.) & price)

_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL =	\$ _____

Other

_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL =	\$ _____

Other

_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL =	\$ _____

Event Contact Information

Name: _____
Phone #: _____
E-Mail: _____

Event Information:

Please answer the following questions regarding the performer(s) and/or content of the event. If more space is needed, attach extra pages. Questions continue on the next page.

Give a brief biography of the performer(s) including relevant educational, professional and personal history. Attach any reviews, articles, etc.:

Describe the nature and content of the performance/event:

How did your group learn about the performer (i.e. industry leader, suggested by other universities, read about in a class etc.)? Attach any references:

Explain the significance of the event and the benefits the event will bring to CU. Be specific.

What does your group hope to accomplish by producing this event?

If this is an annual event, please summarize event history. Include funding history.

Is any type of revenue-raising activity planned by the performer or your student group in connection with this event (i.e. ticket sales, book sales)? Yes _____ No _____

If yes, please explain revenue-raising plans.

Is this event being planned in conjunction with another organization or university department or as part of another event (i.e. keynote speaker held during an awareness week)?
Yes _____ No _____

If yes, please explain.

Will food be served at the event or at a reception after the event? Yes _____ No _____
(If food is to be brought into the UMC, approval must be obtained by the UMC Director's Office).

If yes, please explain plans.

Student Group Event FOOD Funding Request

Note: The Cultural Events Board has a limited amount of money for food and it is likely that your food budget will not be covered entirely. The money given to you by the board is to cover ALL costs relating to food: for instance, catering services charge set-up fees and may charge for utensils. All final budget decisions are up to the discretion of board.

1. How much money are you requesting for food (figure from event budget)? Who will be catering the event or producing the food?

2. a) How many people are you expecting to attend the event? _____
b) How many people are you expecting to feed? _____

3. Briefly describe the role that food plays in your event.

4. How important is food to the success of your event? Please rate on a scale from 1-5 (1=the event can go on without food and 5=the event cannot proceed without food) and give a brief explanation.

1	2	3	4	5
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5. Has your student group held an event that included food in the past? If so, what was the event, where did you receive the funding, and describe the outcome of the event. Has this event (the event you are proposing now) included food before? If so, where did you receive the funding and what was the outcome of the event?

6. Please list other anticipated FOOD funding resources. NOTE: these anticipated funding resources may be the same as the ones listed in your event budget, but should only be resources whose funds will contribute to the costs needed for food.

Please include a schedule of activities if this proposal packet is for a multi-activity day or week.

EVENT

DATE/TIME

PLACE