



2008-2009 Reserve Request Forms

PRINT THE FORM and have **ALL** parties sign.
Submit in SFC Chair's Inbox in ASPSU office SMSU 117

- **Please submit at least one week prior to the next scheduled SFC Meeting.**
(Keep in mind it may take longer than 1 week to be on the hearing schedule)
- **Please bring nine photocopies of this completed form to the meeting.**

Reserve Request Type (Circle): **Discretionary** **Designated**

Organization Name: _____

Requested Amount: _____

Please provide a detailed description of the purpose for reserve funding and specifics for its allocation. For example, \$200 in reserve funding would provide support for marketing...with an itemized list of expenses (logo=\$40, materials=\$120, mailing=\$40). Please refer to **Article VIII of the SFC Guidelines** for more information.

(ATTACH ADDITIONAL PAGES IF NECESSARY)

REQUEST AUTHORIZATION

Organization Coordinator: _____ Date: _____

Contact information for student group: email: _____ **Phone Number:** _____

SFC Liaison: _____ Date: _____

Advisor/Faculty Advisor: _____ Date: _____

FOR STUDENT FEE COMMITTEE USE ONLY

Vote: For _____ Against _____ Abstained _____ | Approved \$ _____ | Denied _____ Fund _____

STUDENT FEE COMMITTEE CHAIR: _____

UNIVERSITY BUDGET OFFICE: _____

(Indicates Transfer of Funds Completed)