

CHICAGO STATE UNIVERSITY
STUDENT ACTIVITIES

2014-2015 Student Activities Funding Application

Please fill out all of the required fields to the best of your ability (preferably typed). For an application to be considered, it must be emailed to the Office of Student Activities Director or Assistant Director turned into the Office of Student Activities, CRSUB, Suite 260ⁱ

Student Org Name: _____

Event Date: _____ Event Start Time: _____ Event End Time: _____

Event Location: _____ Organization Contact Name: _____

Phone Number: _____ Email Address: _____

Please answer the following questions, if you have any questions regarding this application, email and or call MaToya S. Marsh at 773.821.2601 mmarsh@csu.edu

Funding is needed for:

- Giveaways Apparel Speaker Entertainment Performer Trips
 Graphic/Print Food Other _____

1) What is the mission or purpose of the organization?

2) Brief description of the event:

3) Why do you want to put on this event and how does it meet the goals or purpose of your organization? If not for an event, skip to #8

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- 4) How many people are expected to coordinate this event? Are you partnering with any other organizations across campus?

- 5) How are students expected to benefit from this event?

- 6) What is the projected attendance (students, faculty, and community)? How did you come to this number?

- 7) What is the marketing plan for this event?

- 8) How would receiving these funds benefit your organization?

- 10) How would receiving these funds benefit students at CSU?

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Budget Sheet

Student Org Name: _____

Event Date: _____ Event Start Time: _____ Event End Time: _____

Event Location: _____ Organization Contact Name: _____

Phone Number: _____ Email Address: _____

Please complete the following budget related to your event. The budget sheet should include **ALL** expected expenses for your event. Please contact the Office of Student Activities with any questions or concerns regarding the budget sheet.

The Office of Student Activities **CANNOT FUND**: Awards/Trophies/Prizes, Capital Expenditures, College Commencement Ceremonies, Contest Entries, Damage Deposits, Departmental Honor Nights, Donations, Newsletters, Office Supplies, Salaries, or Scholarships.

Remember this event **MUST BE free to all students** to receive funding.

Speaker/ Honorarium/Conference Travel Expenses

*The honorarium amount for the speaker should include the Speaker Fee as well as:

- **Flights** - No more than \$500 round trip will be funded. No business or first class flights will be funded
- **Meals** - No more than \$35 per day: \$10 for breakfast, \$10 for lunch, and \$15 for dinner
- **Lodging** - \$99.00 per night
- **Conferences** – Please attach supporting documents, i.e. Agenda, Itinerary and Quotes

Speaker/ Performer/ Student Name	Amount to be Paid*	Co-Sponsorship Name:	Co-Sponsorship Name:	Amount Requested from CSU-SAC
	\$	\$	\$	\$

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Total Amount Requested:	\$
Co- Sponsorship Amount:	\$
Co- Sponsorship Percent:	%
Total Amount:	\$

NEXT STEPS:

- Contact Person will be contacted if funding is/or is not approved with approved amount within five business day of received completion application

Student Activities Center
773.995.2300

Date Received _____ By Whom _____

Approval _____

Denial _____

Amount _____

Date _____

ⁱ Revised August 21, 2014