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| --- |
| UFO APPLICATION*Must be typed* |
|  Contact Information |
| Organization Name: |
| President’s Name: |
| Cell phone: | E-mail: |
| Advisory Name: |
| Advisor phone: | E-mail: |
| Name of Event: |
| Location of Event: | Date: | Time of Event: |

|  |  |
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| Did this organization use previous UFO funding? [ ] Yes ￼**[ ]** No NoIf Yes, How Much, list date and amounts?  | **Amount Requested**  |
| Funding Policies (please read stipulations and sign below). |
| 1. Request must be received **28 days** before funding is required in order to be considered.
2. Organizations must be registered in the Campus Activities Office as an official organization in good standing.
3. Organizational eligibility is determined by a representative present at **75%** of SGA meetings.
4. In order for the request to be considered, a representative must attend the UFO Committee meeting in order to present the allocation request.
5. The UFO committee may allocate a maximum of $750 per organization one time per semester (Fall, Spring,). Only one request may be approved per semester.
6. Requests for **more than $750 must be submitted at least (6) six weeks before** your scheduled event.
7. If this request is approved, a representative must meet with the Student Life Secretary in order to submit the proper paperwork either to the Sul Ross State University’s Controller Office or Purchasing Department.
8. Requests for travel must be complete and in compliance with State and University regulations on travel. Please include name of Sul Ross Faculty/Staff member that will be attending the trip with your organization **(required for any off-campus function)**. Information on the University Guidelines is located online at <http://www.sulross.edu/pages/3332.asp>.
9. Do not make reservations or pay for any travel costs if you want UFO to consider your application.
10. Activities or programs which **will not** be considered for UFO funding include: a) Purely social programs or activities (i.e. parties or dances); b) Political activities that is partisan in nature (unless it will benefit the SR community); c) National or State dues for individuals; d) Scholarships, gifts, or awards; e) Maintenance and operations that are NOT related to a specific program or activity that is funded; f) Any other activity or program which does not meet the purpose of the student service fees as defined by the Education Code 54.503 (a)(1).
11. Any money allocated, but not used WILL be returned to the UFO account. **WE DO NOT TRANSFER FUNDS TO YOUR ORGANIZATION’S ACCOUNT.**
 |
| i HEREBY SWEAR AND AFFIRM THAT i UNDERSTAND THE ABOVE REQUIREMENTS REGARDING THIS FUNDING REQUEST.  |
| Student Signature |  | Date |  |
| Advisor Signature |  | Date |  |
| Student LifeRepresentative |  | Date: |  |

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| **Purpose and Objective:** Briefly describe the purpose of the project for which you are requesting funding and what benefits you expect to receive from such funding. |
| **Activities:** What planning and/or fundraising has your organization done towards this project? What has your organization done in the past to raise money?  |
| **Advertising:** If your program is going to be open to more student than just those in your organization, how will you be advertising the activity?  |
| **Other:** If there are any further comments you would like to include for consideration, include them here: |
| **COST:**  Itemize multiple costs involved in your program, please list such costs and specific vendors.  |

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| --- | --- | --- | --- |
|  | **TRAVEL COSTS (Please complete and attach a Travel Application)** |  |  |
| **Type** | **DETAILS/BREAKDOWN OF EXPENDITURE** | **TOTAL PRICE** | **SGA USE ONLY** |
| Registration | $\_\_\_\_\_\_\_\_\_\_\_\_\_(fee) x \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(# members) |  |  |
| Lodging | $\_\_\_\_\_\_\_\_\_\_\_(Price per night) x \_\_\_\_\_\_\_\_(# of nights) x \_\_\_\_\_\_\_(# of rooms) |  |  |
| Travel | $\_\_\_\_\_\_\_\_\_\_\_\_(Airfare) x \_\_\_\_\_\_\_\_\_\_\_\_(# of members)$\_\_\_\_\_\_\_\_\_\_(Rental) |  |  |
| Mileage | \_\_\_\_\_\_\_\_\_\_\_\_\_Miles @ 0.48 |  |  |
| Other |  |  |  |
|  |  |  |  |
|  |  **TOTAL** |  |  |
|  | **BREAKDOWN OF VENDOR EXPENDITURES** |  |  |
| **VENDOR** | **QTY** | **DESCRIPTION** | **PRICE** | **TOTAL** | **SGA USE** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

***FOR OFFICE USE***

|  |  |  |
| --- | --- | --- |
| **APPROVED****[ ] Yes** ￼**[ ]  No** | **AMOUNT APPROVED:** | **SGA Treasurer Signature & Date:** |
| **DENIED FUNDING: [ ] Yes Yes**  | Reason denied: |  |

**Event Budget**

*List all expenses. Please use the notes section below each category to explain costs in greater detail.*

*Be sure to cover ALL costs, not just those you are asking UFO for funding for.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Category** | **Total Cost** | **Amount Requested from UFO** | **Rank** |
| ***Advertising & Publicity*** *(Please attach a copy of emails/fliers to the end of this application.)* |
| * Posters/fliers
 | $ | $ |  |
| * Other:
 | $ | $ |  |
| *Notes:* |
| ***Operations*** |
| * Office supplies (please specify):
 | $ | $ |  |
|  | $ | $ |  |
| *Notes:* |
| ***Printing & Publications*** | $ | $ |  |
| *Please attach a copy of the publication to the end of this application.* |
| ***Facilities & Equipment Rental*** |
| * Equipment (please specify):
 | $ | $ |  |
|  | $ | $ |  |
| * Room rental
 | $ | $ |  |
| *Notes:* |
| ***Services*** |  |  |  |
| * Speaker honorarium
 | $ | $ |  |
| * Speaker travel
 | $ | $ |  |
| * Speaker lodging
 | $ | $ |  |
| * Other:
 | $ | $ |  |
| ***Student Travel*** |
| * Lodging
 | $ | $ |  |
| * Transportation
 | $ | $ |  |
| * Vehicle Rental
 | $ | $ |  |
| * Gas
 | $ | $ |  |
| ***Capital Goods*** |
| * T-shirts
 | $ | $ |  |
| * Other:
 | $ | $ |  |
| ***Food:*** | $ | $ |  |
| ***Other:*** | $ | $ |  |
| ***TOTAL EXPENSES*** | $ | $ |  |

**Please remember to attach a mock-up version of the flier, publication, or t-shirt design, or quotes.**