

## FUNDS REQUEST FORM

*\*Print and Turn form into Student Life\**

Student Senate Funding Requests are due by noon the Friday before the next scheduled Student Senate meeting. Student Senate will review requests not submitted on time at the next meeting. Please print form and return to Student Life or email as an attachment.

### Full Student Senate Meeting Schedule for 2023-24 (CC 244 from 2:30pm-4pm):

#### Fall Semester - 2023

September 21, 2023  
October 5, 2023  
October 26, 2023  
November 9, 2023  
November 30, 2023

#### Spring Semester - 2024

January 25, 2024  
February 8, 2024  
February 22, 2024  
March 14, 2024  
March 28, 2024  
April 18, 2024

Current Date:

Click or tap to enter a date.

Name of Person Submitting Request:

Click or tap here to enter text.

Club/Organization Name:

Click or tap here to enter text.

Club/Organization Email:

Click or tap here to enter text.

Advisor Name:

Click or tap here to enter text.

Advisor Email or Phone Number:

Click or tap here to enter text.

Does a representative for your club regularly attend Student Senate Meetings?

YES  NO

Will your club/organization collaborate with another club or department this request?

YES  NO

Please list club/organization or department you are collaborating with for an event.

Click or tap here to enter text.

### FUNDRAISING EFFORTS:

Clubs and Organizations are encouraged to fundraise as another source of funding. Please list below any fundraising your club has done or is planning to do:

Click or tap here to enter text.

Estimated Amount to be fundraised:

Click or tap here to enter text.

**FUNDING REQUEST:**

Club/Organization Cost Center Number: (If you do not know your cost center number leave blank)

Click or tap here to enter text.

Total Amount Requesting:

Click or tap here to enter text.

Current Budget Amount:

Click or tap here to enter text.

Describe your request in detail in the box below and email all supporting documents to [studentlife@nhcc.edu](mailto:studentlife@nhcc.edu). If additional space is needed please use another sheet and attached.

Item/Service	Provider/Company	Quantity	Total Cost

**FOR OFFICE USE ONLY:**

Has the Club/Organization been approved for funds from Student Senate before? Yes___ No___
If so, How much \$_____ Frequency _____
Approved_____ Denied _____