

Associated Student Government Funding Request

IMPORTANT INFORMATION ABOUT FUNDING REQUESTS:

(Initial acknowledgement of each stipulation) I acknowledge that the funding request must be filled out **completely** upon being submitted for review, and that incomplete funding requests will be returned. I acknowledge that a completed funding request must be submitted 72 hours before the ASG Board of Directors meeting to be considered for the next meeting agenda. I acknowledge that I must receive a written confirmation from the ASG Treasurer with the date of the Board of Directors meeting where my request will be reviewed. It is my responsibility to follow up with the ASG Treasurer if I have not received an email within 48 hours of submitting this form to the ASG Treasurer. I acknowledge that the information submitted in this document is what will considered by the Board of Directors. Any increases in funding amount made to the request during the Board of Directors meeting will not be considered by the ASG Board of Directors. I acknowledge that all clubs and programs who wish to receive funding must commit to two presentations during an ASG Board of Directors meeting: 1. Up to a 5-minute presentation to request funding. At least one student organization or involved party member must be present, but I am encouraged to bring the student organization president, treasurer, group members, and group advisor. 2. Up to a 5-minute presentation to recap the event, travel, or activity funded by allocations received. This must be at the ASG Board of Directors meeting following the event, travel, or activity. I may provide a presentation, but I am encouraged to bring all members who participated and group advisor. I acknowledge that funding requests will be reviewed on a case-by-case basis as funds are available and that my request is relative to the education and success of Bellevue College students, as directed by the ASG Financial Code I acknowledge that ASG Board allocations are subject to the S&A Fee Use Compliance and Guidance Document, Killian Guidelines, and applicable state laws, College regulations, policies, and procedures governing state funds generally and S&A funds in particular.

Please sign to acknowledge receipt and understanding of the stipulations above: STUDENT ORG. OFFICER SIGNATURE STUDENT ORG. TREASURER SIGNATURE **ADVISOR SIGNATURE** If applicable: PROJECT LEAD Associated Student Government Funding Request Information PLEASE NOTE: All applicable pages of this form must be completely filled out upon being submitted for review. An incomplete funding request could be included but not limited to no advisor signature, no Project Plan completion, and blank information spots. ASG also does not fund the following: any student organization/project that is in violation of the ASG Bylaws; direct religious worship, exercise or instruction, or the promotion of non-secular beliefs; campaign contributions (under no circumstance may public funds be used as a gift or campaign contribution to any elected official or employee of a public agency). Club/Organization Name: Student Name: Student ID: Student Phone Number: Student BC Email: Today's Date: Faculty/Staff Advisor(s): Advisor(s) Phone Number: Advisor Signature: **Student Engagement Questions:**

Club/Project Questions:
Have you discussed financial matters and your project plan with Student Engagement Staff? \square Yes \square No
Have you attended the mandatory Student Org. Orientation for the current academic year? \square Yes \square No
Have you completed the mandatory Student Engagement Project Plan? ☐ Yes ☐No

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Has your student organization been chartered/rechartered for this academic year? ☐ Yes ☐ No
How many active members (members that regularly attend events, meetings, etc.) participate in your
club/program?
Did your student organization receive funding from S&A in the previous academic year for this current year? If
so, how much?
□ Yes, \$ □No
How much has your student organization fundraised during this academic year? \$
Does your student organization plan to fundraise this academic year? If so, what are your plans and have you
received funding? No Yes,
How will your event/travel/activity support your organization's vision, mission, and goals?
How will your event/travel/activity support your organization's learning outcomes?
Other Questions:
If you are purchasing equipment/campus, where is this equipment to be stored on campus?
Do you have fundraising money stored at the Bellevue College Foundation? If so, for what event/travel/activity? □ No □Yes,
Is this event/travel/activity supported by another department? If so, which department and how are they providing support? No Yes,
Required Materials/Need (please delete unused pages):
Additional pages may be attached to this document and be submitted with the request. This is included but not limited to a longer description of items, letter of support, expected benefits, and description of goals and objectives.
☐ If the request is for an event, pages 4 and 5 must be completed.
☐ If the request is for a travel, pages 4 and 6 must be completed.
☐ If the request is for any other reason, pages 4 and 7 must be completed.

Funding Request- Total Cost

Total Cost:	\$	
Other Sources of Funding (if applicable)	:	
Fundraised Amount in Foundation	\$	
Department Support	\$	
Club/Program Member Co-Pay	\$	
S&A Account Balance	\$	
Other (Donations or Sponsorships)	\$	
Total	\$	
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Funding Requested from ASG	\$	
Additional notes or information regarding	g the request:	

Funding Request- Events

PLEASE NOTE: Depending on the event, the Student Organization Handbook outlines the appropriate timeline for planning which can range from 2 to 8 weeks. Events or programs requesting food must work with Bellevue College Food Services for catering or to receive approval for outside catering. Funds **cannot be used** for outside catering **without prior approval** from BC Food Services.

What is the purpose	of the even	nt?				
When do you expec	t to host th	is event?				
How will this event	be advertis	sed?				
How many people of attend this event?						
Where will this ever	nt be held?					
	Item	Vendor	Cost Per Unit	# of Units	Description	Total Cost
Printing Costs			\$			\$
Performer Costs			\$			\$
Supplies/Materials			\$			\$
Food/Beverage Costs		☐ BC Food Services ☐Outside catering:	\$ _		Have you communicated with Food Services? ☐ Yes ☐ No	\$
Personnel Costs	X	X	X	X	This includes custodial, public safety, porter, Events Program Coordinator, theater technician, etc.	\$
Venue			\$			\$
Miscellaneous			\$			\$

Funding Request- Travel

PLEASE NOTE: Per the Student Organization Handbook (pages 68-70), the Project Plan to travel must be submitted **at least 8 weeks** ahead of the travel dates. While 8 weeks is the minimum, travel cannot be booked until funding is received, and the Project Plan approved. It is encouraged to submit the Project Plan **3-4 months ahead** of the travel dates and the funding request after meeting with Student Engagement staff.

Name of Conference/Competition/Workshop					
	/ WOIKSHOL)			
URL (if applicable)					
Date(s) of	/337 1 1				
Conference/Competition	/ Workshop)			
Date(s) of Travel (if difference previous question)	erent from				
Location:					
What is the purpose of at	ttending?				
# of Students Attending:					
# of Advisors Attending:					
	Cost Per Unit:	# of Uni	its:	Description:	Total Cost:
Hotel	\$			How many rooms will you need?	\$
				Expected cost per night:	
				How many nights?	
				Does the total amount include travel agency fees? ☐ Yes ☐ No	
Transportation	\$			Car (per unit): \$	\$
•				Airfare (per unit): \$	
				Other, if so, what mode: \$,	
				Does the total amount include travel agency fees?	
				☐ Yes ☐No	
Conference/Tournament/	\$			Registration deadline:	\$
Workshop Fees				Is there any early registration discount? ☐ Yes ☐ No	
Food/Beverage Costs*	\$				\$
Miscellaneous	\$				\$
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^{*}Food/Beverage costs must follow the per-diem set by the U.S. General Services Administration, and includes three (3) meals per day with partial meals on the first and last day (travel days) https://www.gsa.gov/travel/plan-book/per-diem-rates

Funding Request- Other

What is the purpose of this request?	
Expected attendance (if applicable)	
Expected usage (if applicable)	
Other Information	

Please fill out information below as applicable:

	Item	Vendor	Cost Per Unit	# of Units	Description	Total Cost
Printing Costs			\$			\$
Performer Costs			\$			\$
Supplies/Material			\$			\$
Food/Beverage Costs Personnel Costs	X	☐ BC Food Services ☐Outside catering:	\$ X	X	Have you communicated with Food Services? ☐ Yes ☐ No This includes custodial, public safety, porter, Events Program Coordinator, theater technician,	\$
Venue			\$		etc.	\$
Merchandise			\$			\$
Miscellaneous			\$			\$