Evergreen Valley College

ASEVC EVENT/ACTIVITY FUNDING REQUEST APPLICATION

Event/Activity Title: _____

Date of Event: _____ Time: _____

Location: _____

Contact Person: _____ Phone: _____

Email: _____

Current Club Account Balance: _____

1. How does the money you request benefit the fee paying students of EVC?

2. How will you market your event to the fee paying students of EVC?

3. How much money are you requesting? Please list the items that ASEVC will specifically be funding.

Please submit this form along with the itemized budget to ASEVC (G-201) by Monday before 5 pm. If all documents are not submitted, ASEVC reserves the right to not consider your application.

Required documentation in order to be placed on the ASEVC agenda:

1. ASEVC Event/Activity Funding request Application
2. Itemized Budget that includes any additional funding sources

NOTE: You are required to attend the ASEVC meeting. If approved, you are required to attend the following week's Funding Board meeting.