



Cornish Student Leadership Council

# Student Interest Group Funding Request

S.I.G. Name: \_\_\_\_\_

Date: \_\_\_\_\_

Primary Student Contact: \_\_\_\_\_

Phone # \_\_\_\_\_

Email Address: \_\_\_\_\_

Mobile # \_\_\_\_\_

Faculty/Staff Advisor (optional): \_\_\_\_\_

Phone # \_\_\_\_\_

*Please write a brief overview of how funds will be allocated for you event or series of events.*

Request Overview / Explanation:

*Please state the amount you are requesting in each category below:*

<u>CATEGORY</u>	<u>AMOUNT</u>	<u>DESCRIPTION</u>
Supplies/Materials	\$ _____	_____
Printing/Reproduction	\$ _____	_____
Miscellaneous	\$ _____	_____
Food/Beverage	\$ _____	_____
Other	\$ _____	_____
Other	\$ _____	_____
Total Request	\$ _____	

Submitted by: (please print) \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*Cornish College of the Arts Student Interest Group funding provides funds for chartered clubs and organizations. Chartered clubs and organizations may not discriminate based on race, creed, color, national origin, gender, religion, sexual orientation, marital status, disability, age or veteran status.*

***Please note that all Funding Requests are due to Student Affairs within three weeks of your scheduled event(s).***

***To be completed by CSLC***

Date Received: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Amount Approved: \$ \_\_\_\_\_

By: \_\_\_\_\_

**NOTES:**