[Insert Organization Logo Here]

[Insert Organization Name]

2026-2027 School Year

[Indicate Semester]

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Instructions

- Fill out all sections completely and accurately. Incomplete proposals will not be considered.
    - Blank Text: Should not be edited/altered
    - Yellow: Insert information
    - Green: Highlight option(s)
- If a section does not apply, indicate “N/A.” Do not leave any section blank.
- For Executive Summary:
    - If you are requesting funding for multiple events or programs, please complete a separate Executive Summary for each program.
    - If you are requesting miscellaneous items or general organizational support, use the Executive Summary template to explain how these materials support your organization’s broader goals and activities.
- Make sure all numbers add up, and include tax in your calculations
- Be as specific and detailed as possible. Clear proposals make it easier for the Senate to evaluate and support your request.
- Submit to the Senate for review

[Insert Organization Name] Mission Statement

[Insert mission statement of organization]

Executive Summary [Add more pages if needed]

Program Name: [Insert name of event]

Category of Program (highlight one or multiple):

- **Academic/Educational**
- **Professional Development**
- **Social/Cultural**
- **Health & Wellness**
- **Community Service**
- **Other**

Date: [Insert intended date]

Location: [Insert intended location]

Intention: [Outline intention of event, include why items are essential for event/program/initiative's success]

Outstanding Costs:

Item (include link to item)	Quantity	Cost
[Insert item]	[Insert quantity]	[Insert cost]
[Insert item]	[Insert quantity]	[Insert cost]
[Insert item]	[Insert quantity]	[Insert cost]
		[Insert total cost]

Credit Check

- Number of Active Members within Organization: [Insert number]
- Number of Events Hosted Last Semester: [Insert number]
- Average Attendance at Past Events: [Insert average number]
- Past Funding Received (if any): [Insert amount or “N/A”]
- Partnerships/Sponsors/Collaborations for this program(s): [List any organizations involved]
- Does Your Organization Fundraise? (highlight one) ☐ Yes ☐ No
    - Total Amount Fundraised Last Academic Year (if applicable): $[Insert amount]
- **Officer Contact List (President, Treasurer):**
    - President: [Insert name/email]
    - Treasurer: [Insert name/email]

Total Funding Request Breakdown

[Summarize details in the executive summary]

Category	Amount
[Insert Name of Initiative/Program/Event]	**[Insert Amount]**
[Insert Miscellaneous Materials (if applicable)]	**[Insert Amount]**
Final Total Requested:	**[Insert Final Total]**