On a separate typed sheet please provide the following information in this order:

1. **Group Name** (As approved by the President)
2. **Group Department Number**
3. **Date group was first recognized**
4. **Date Request Submitted**
5. **Contact Information:**
   a. President: E-mail Address & Phone Number
   b. Treasurer: E-mail Address & Phone Number
6. **Does your group have an Agency Account?** (See Treasurer’s Handbook for details)
7. **Please attach a list of the number of active members, names, and if available contact information**
8. **Please attach the following items:**
   1. Statement of the purpose, function and goals, and how it contributes to the University at Albany.
   2. Appropriation request: Be as specific as possible with your requested appropriation breakdown. Including, but not limited to: details about the lines, budget object names and numbers you wish your request to be put into, rationale for request, why the original budget was insufficient.
      a. Provide flyers, price quotes and any additional information about your proposal that will help aid the committee in evaluating your request and needs (Please include 3 price quotes for any individual allocation exceeding $250).
      b. It is advised that you demonstrate to the committee that your group has a history of fiscal responsibility (including proper use of funds and fundraising) and does not overspend lines. Supplemental allocations should NOT be used to pay off debts due to fiscal irresponsibility.

FOR OFFICE USE ONLY BELOW THIS LINE

Received by: _____________________
Date: ______________
Time: ______
Initials: ________

*Attention Administrative Assistant: Please fill in the above and place in the mailbox for the Appropriations Chair.*