

**APPLICATION FOR
UAS SUPPLEMENTAL PROGRAM FUNDS
Academic Year 2007-2008**

Name of Event

Official Name of Sponsoring Group

Date of Event

Event Location (Bldg., Room No.)

Name of Contact Person/Title

Address of Sponsoring Group

Signature of Contact Person

Address of Contact Person (if different)

e-mail address of Contact Person

Phone number of Contact Person

e-mail address of Contact Person after
May 10, 2007 (if different)

Phone number of Contact Person after
May 10, 2007 (if different)

I. Summary Description of the Event

A. Please describe the Event: _____

B. How will it benefit the University Community? _____

C. Is the program open to all members of the University Community? _____

D. How does the event relate to the objective of this group? _____

E. How many people are expected to participate? _____

F. Did you sponsor this event in the past? ___ How many people participated? _____
What was the total cost of the event? _____

G. Have you received UAS Program Funds for previous events? Yes _____ No _____
If yes, please indicate the year, the name of the event and the amount awarded. _____

H. Provide a brief description of promotional effort _____

II. Any additional information that you believe will help the committee evaluate your request (such as event itinerary, promotional announcements, and event program)

III. Budget Summary

A. Itemized List of Expenses:

(Specify in detail all expenses that will be incurred as part of the event)

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

** Please refer to Guidelines #5 & #13**

Total Expense (A) \$ _____

B. Revenues

1. Admission/Participant Fee	\$ _____
2. Funds from your original budget	\$ _____
3. Outside sources of financial support other than UAS, list:	\$ _____

Total Revenues (other than UAS) (B) \$ _____

C. Summary

Total Expenses (A)	\$ _____
Total Revenues (B)	\$ _____
Total request of UAS (A minus B)	\$ _____

Signature

Date