Lamar State College-Port Arthur

Student Organization Annual Funding Budget Request 20____ to 20____

APPLICANT INFORMATION				
Organization Name:				
Organization Advisor (s):				
Email:	Phone:			
ORGANIZ	ATION INFORMATION			
No. of Active Members:	Total No. of Members:			
Recruiting efforts of organization:				
	SAL INFORMATION			
Reason for Request:				
How does this request meet the college?	's goals and mission?			
Is this a one-time request or annual?	How many years?			
Have those attending paid their member	rship dues?			

SIGNATURE OF DEPARTMENT

We, the undersigned, certify that we are current department representatives of the above campus departments and that the event specified will be held in accordance with all municipal, state, and college regulations regarding such events. Further, we assume collective and individual responsibility for the orderly conduct of this event in accordance with the LSCPA Student Handbook.

Organization President	Date:
Organization Advisor	Date:
Received By (Committee)	 Date:

BUDGET PROPOSAL

Please list all that apply:

Conference Fee: \$ x people \$		Organization Revenue/Contributions:	
	Ψ	Fundraisers	\$
Transportation: Airfare \$ x people	\$	Membership Dues	\$
School Van (fuel)	\$	Donations	\$
Rental Fuel Parking	\$ \$ \$	Other	\$
Hotel: \$ x rooms x nights	\$	Total Contributions	\$
Food: \$ /day x ppl	\$		
Other (list items):			
Please attach information regardetel, per diem, car rental, and a consideration.	<mark>rding confe</mark> ny other ad	erence/event agenda, r ditional information for	
COM		APPROVAL	
Approved □ Amount\$		Denied □	
Or Deborrah Hebert Dean of Student		 Date	