

Student Organization Activity Request Form

NOTE: *If using Student Activities funding*, requests for food must be submitted at least 2 weeks in advance for proper approval using the ProCard Form.

Organization: _____

Name of Activity: _____

Beginning Date: _____ **Ending Date** _____

Requested Location for Activity:

Is this a fundraiser? _____ If yes, give details. Raffle/lottery type activities prohibited. _____

Is this an off-campus activity? _____ If yes, give details. _____

Is this event open to all students or only members of the student organization?

Would you like to have this event publicized through the Office of Student Activities?

____ Yes ____ No

*If yes, must provide flyer with details and contact information to Student Activities.

President of Organization Faculty/Staff Advisor of Organization

Approved: ____ Yes ____ No

Comments: _____

Student Activities Coordinator: _____ **Date** _____
