

SOCIETY FUNDING REQUEST FORM:

Please ensure that at least two weeks' notice is given for all funding applications to enable sufficient time for approval and processing of requests.

NAME OF SOCIETY			
NAME OF SOCIETY LEAD			
DATE OF REQUEST			
IS THE FUNDING FOR:	<input type="checkbox"/> A ONE OFF ACTIVITY	<input type="checkbox"/> THE TRIMESTER	<input type="checkbox"/> THE YEAR

WHAT ARE YOU REQUESTING FUNDING FOR?	QUANTITY REQUIRED:	COST PER ITEM:	TOTAL COST:
TRAVEL			
TICKETS			
EQUIPMENT			
MATERIALS			
REFRESHMENTS			
PRINTING			
VENUE HIRE			
OTHER			
IF OTHER PLEASE ADD MORE INFORMATION HERE			

TOTAL FUNDING REQUESTED		
TOTAL REGULAR ATTENDING SOCIETY MEMBERS		
IS THE COST TO BE COVERED BY THE SU UPFRONT OR REIMBURSED AFTER PURCHASED	<input type="checkbox"/> COVERED BY THE SU	<input type="checkbox"/> REIMBURSED
MORE INFORMATION WILL BE PROVIDED IF APPROVED AND REQUESTING REIMBURSEMENT PAYMENT.		

SU STAFF USE ONLY			
FUNDING APPROVED	YES	NO	
SIGNED BY:		DATE:	