

Is your group SOC Approved?
 Yes No
 Will be verified by the Center for Student Involvement



OFFICE USE ONLY
 Date Received _____
 Staff Member Initials _____

2007-2008 Equipment Fund Request Form

Name of Requesting Group: _____ Activity Account # SA

	<u>Name</u>	<u>Phone</u>	<u>Email</u>
President:	_____	_____	_____
Treasurer:	_____	_____	_____
Sponsor:	_____	_____	_____

*The sponsor is included on the form for information purposes only, according to the SGA constitution, only students are allowed to present information to the senate and to the Appropriations committee.

Student in Charge of Paperwork: _____

FHSU ID Number (8-digit Number): _____

**Your 8-digit FHSU ID number can be located on your FHSU TigerTracks Account. Once you have logged into TigerTracks, select the online services tab. When you reach the student information system, scroll down and select "My FHSU ID" located under the personal information tab.

Contact Information: Phone: _____ Email: _____

Justification of Need for Equipment: _____

Itemized list of Equipment and costs**: _____

Amount of Equipment Fund Request:

Are you requesting less than \$1500?

If Yes fill out A		If No fill out B		Office Use ONLY Recommendation
A		B		
Amount Requested	\$	Total Equipment Cost	\$	
Amount of the Equipment	\$	1. Subtract	(\$1,500)	
		2. Amount to be split	_____	
		3. Divide by two: half of #2	_____	
		Total Requested #3 + \$1500	_____	

**** Must attach proof of cost (i.e. copy of ad).**

Does your organization have a 6 digit account (state account)? _____ If so, what is it? _____

1. Will this equipment be used by members of the faculty/staff of the department? _____

2. How will this equipment be used to benefit the members of the organization as well as the student body?

3. Who will have access to this equipment? _____

4. Are funds raised prior to this request being used as an alternative source of funding for this equipment?

5. Where will this equipment be stored? _____

6. What types of fundraising events does the organization hold, and how is that money used?

7. What service projects do you have planned to complete the required 20 hours of service?

8. What types of on-campus activities are performed by this group?

9. Please attach a current listing of all active members in the organization (names & classification only).