

ASWCC Funding Request Form

Funding requests will be reviewed by the ASWCC Executive Board, the ASWCC Senate, and/or ASWCC Interclub Council on a case-by-case basis. Requests must be relative to the education and success of current Whatcom Community College students, as directed by the ASWCC Financial Code.

Organization/Individual(s):			
Requester Name (contact person):_	Email:		
Advisor/Supervisor:	Email:		
Request Title:			
Request Date:I	Date Needed (at least 2 weeks prior request o	date):	
Total Cost of Project/Item(s)			
Are you asking this whole amount from the ASWCC?		□ Yes	□ No
If no, how much are you requesting from the ASWCC?			
• •	S&A fees? (If you are unsure of permiss of Services and Activity Fees or Killian Ou	• •	
3. Have you previously received much?	funding from Service and Activities Fee?	? If yes, whe	n and how
- Required. If request is for trave	initiate a meeting with the Director f	or Student Li	fo and
-	el, initiate a meeting with the Director fo	or student Li	<u>je unu</u>
<u>Development to discuss trave</u>			
Please attach the following doc	<u>uments:</u>		
□ <u>Descriptions of goals, objective</u>	es, target population, expected use by st	tudents/facu	Ity and the
benefits to the ASWCC.			
☐ Attached letter of support from	m your advisor, faculty, or staff member		

Deadline: 4 business days before the meeting or council at which will be presented

PROJECT BUDGET

LIST EXPENSES: (Please list total project, including items funded from other sources

ITEM	DESCRIPTION	AMOUNT		
	Total Cost of Project			
OTHER SOURCES OF FUNDING (i.e.: fundraising, departmental support, or individual support)				
	FUNDING SOURCE	AMOUNT		
	Total amount of expenses already covered			
	Total Amount Doguesting from ASMICC			
	Total Amount Requesting from ASWCC			
FOR OSLD STAFF USE ONLY				
This Funding Request for Irea	uest title)			
This Funding Request for (request title) budget has been approved in the amount of \$				
Proposals that are not approved will be returned to the requester with a memorandum of explanation via email.				
S: 1 (ASMES 5 1)				
Signature of ASWCC Executive	e Board officer	Date		
Signature of Everytive Beard	Advisor	Data		
Signature of Executive Board A	AUVISUI	Date		

Last Revision: 05/30/19