

# Supplemental Funding for Conferences - Guidelines

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We understand the value in allowing members of your SA group to have the opportunity to attend conferences. However, there is a limited amount of funding available for this use.

For this reason, a few guidelines have been set in place to ensure that all SA groups have equal opportunity to participate in conferences and that our limited funding is distributed fairly.

**The following criteria must be met in order for a group to be eligible to submit a request for supplemental funding:**

1. The conference may have a maximum of 4 attendees from the same SA group.
2. Registration fees for the conference must be less than \$100 per person.
  - Note: Supplemental funding will only cover registration fees of \$100 per person. If registration fees exceed this amount, the SA group may pay the difference in cost out of their budget with approval of their Student Accountant and/or the SA Treasurer.
3. The same SA group may only receive Supplemental Funding for Conferences once every other year.

# Conference Fund Request Form

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Name of Group Requesting Funds: \_\_\_\_\_

Amount Requested: \_\_\_\_\_

Conference Name & Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Conference Date: \_\_\_\_\_

Conference Location: \_\_\_\_\_

Length of Conference: \_\_\_\_\_

Number of Attendees: \_\_\_\_\_

Means of Transportation: \_\_\_\_\_

**Please answer the following questions and attach:**

1. Why do you feel your group will benefit from attending this conference?
2. What skills will your group members gain at this conference that they would not otherwise have been able to?
3. How will your group be able to contribute more fully to the campus community after attending this conference?
4. Please include any other information you feel relevant to the request, including a breakdown of expenditures.
5. Please list any potential co-sponsoring groups.

Student Accountant: \_\_\_\_\_

(Name) Printed

Signature

Date

Club Advisor: \_\_\_\_\_

(Name) Printed

Signature

Date

Business Manager: \_\_\_\_\_

(Name) Printed

Signature

Date

Business Manager Email: \_\_\_\_\_