

Program and Travel Supplemental Form

NOTE - 20 copies of this form must be handed in to the SAAC office (101E Wilson Commons) no **later than 12pm (noon) on the Wednesday** prior to the SAAC meeting that you wish to attend, and at least **two weeks prior** to your event.

Program and Travel

Name of Group(s) hosting the event

Amount Requested _____

Group(s) Membership (active/inactive) _____

Program Only

Title of Event: _____

Room space already reserved? (Y/N) _____

Expected Attendance: On Campus _____ Off Campus _____

Description of Event:

Have you run a similar event in the past? (if yes, please give a brief description, attendance, etc)

How will the program contribute to the campus community?

What is your program marketing plan/publicity efforts?

Travel Only

Destination:

Means of Transportation:

Length of Stay:

Number of Attendees:

Expenditures

Items

Anticipated Cost

Total Expenditures

Income

Items

Anticipated Income

Total Income

Total Request (Expense – Income)

Required Signatures

Student Accountant: _____

Name (printed)

Signature

Date

Advisor: _____

Name (printed)

Signature

Date

Business Manager: _____

Name (printed)

Signature

Date

Business Manager Email _____