

# Student Government Association Special Fund Request Form

## Prove It! Fund

***“So, you have a great idea? Here is your chance to PROVE IT!”***

**Attention Applicant:**

Applications must be submitted at least **four** weeks prior to your event/program/initiative. No exceptions will be made. Your organization must be in good financial standing in order to apply. If the event evaluation is not submitted after your event, you will **not** receive the grant. For questions, contact SGA Attorney General Jillian Koller at [jkolle1@students.towson.edu](mailto:jkolle1@students.towson.edu).

**Date Submitted:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Student / Student Organization:** \_\_\_\_\_

**Contact Information:**

Name: \_\_\_\_\_ Telephone number: ( \_\_\_\_ ) - \_\_\_\_ - \_\_\_\_

E-mail address: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Street City State Zip

Name of advisor (if applicable): \_\_\_\_\_ Telephone number: ( \_\_\_\_ ) - \_\_\_\_ - \_\_\_\_

E-mail address: \_\_\_\_\_

**Event Information (if applicable):**

Name of the program/event: \_\_\_\_\_

Program date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Program time: \_\_\_\_ : \_\_\_\_ a.m. / p.m.

Location of the event: \_\_\_\_\_

Target audience: \_\_\_\_\_ Anticipated attendance: \_\_\_\_\_

List all co-sponsoring organizations and departments: \_\_\_\_\_

**--OR--**

**Initiative Information (if applicable):**

Title of Initiative: \_\_\_\_\_

Start date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ End date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Start time: \_\_\_\_ : \_\_\_\_ a.m. / p.m. End Time: \_\_\_\_ : \_\_\_\_ a.m. / p.m.

Location \_\_\_\_\_

Target audience: \_\_\_\_\_

List all co-sponsoring organizations and departments: \_\_\_\_\_

**Purpose / Description of the event (attach additional sheets if necessary):** \_\_\_\_\_

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## Budget Breakdown:

### Attention Applicant:

Under each category please provide a detailed breakdown of what the money requested is being used for (example: soda, flyers, a speaker, tech crew...) and the individual projected prices. Then please provide the total projected expense and the amount you are requesting for each category followed by the total amount you are requesting. For questions regarding the financial section of this application please contact SGA Treasurer Ryan Murphy at [rmurph8@students.towson.edu](mailto:rmurph8@students.towson.edu).

General List of Expenditures (attach additional sheets if necessary)	Total Projected Expense	Amount requested
<b>Talent</b> (This includes but is not limited to a speaker, a band, etc.) - \$ _____ - \$ _____ - \$ _____	\$ _____	\$ _____
<b>Publicity</b> (This includes but is not limited to flyers, ads, etc.) - \$ _____ - \$ _____ - \$ _____	\$ _____	\$ _____
<b>Refreshments</b> (Reminder: Any on-campus catering must be provided by Chartwells Catering; 410-704-2302.) - \$ _____ - \$ _____ - \$ _____	\$ _____	\$ _____
<b>Equipment</b> (Please contact Events and Conference Services for pricing and set-up; 410-704-2315.) - \$ _____ - \$ _____ - \$ _____	\$ _____	\$ _____
<b>Miscellaneous Expenses</b> (This includes items essential to your event that do not fit into an above category.) - \$ _____ - \$ _____ - \$ _____	\$ _____	\$ _____
<b>Total Amount Requested</b>		\$ _____

Have you received or applied for funding from another source for this event? [ ] Yes [ ] No

If yes, state the amount and please explain the donation and/or partnership: Amount: \$ \_\_\_\_\_ . \_\_\_\_\_

\_\_\_\_\_  
Requestor's Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Requester's Signature

\*Facilities must be reserved in advance. You may reserve event locations online through Events and Conference Services at: <http://fusion.towson.edu/www/facilityreservations/>

\*\* Please return completed forms, **with a copy of your room reservation confirmation attached**, to the Student Government Association, UU 226; attn: Attorney General.

# Prove It! Fund Checklist

Student / Student Organization: \_\_\_\_\_

Program / Event / Initiative Title: \_\_\_\_\_

- Application is received at least four weeks prior to event or project
- Program/event/initiative is open to the entire campus community
- Only one event is requested per group/person (per semester)
- No alcohol is served or purchased at event
- Event is free of charge for all members of the TU community
- Event is not a fundraising event for student groups unless funds are given to a charity
- Program/event/initiative abides by TU policies, federal, state and local laws
- Application includes and explains all costs for the program/event/initiative
- Food costs do not exceed 25% of the total funding request
- All program/event/initiative advertising says: "Co-Sponsored by the Prove It! Fund"
- All advertising stresses that this event is open to all TU students
- Program evaluation is submitted within one week of completion of the program/event/initiative

## **REMINDER:**

*The Prove It! Fund has an annual budget. Once the entire budget is allocated, the fund may not be replenished until the next academic year. For this reason, and for the high number of applications that the Prove It! Committee receives, requests may not be fully funded. Every request will be reviewed and processed by the committee. Please remember that the Prove It! Fund is intended to supplement an event and not serve as a full budget.*

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## **FOR COMMITTEE USE ONLY:**

Application was received on \_\_\_\_/\_\_\_\_/\_\_\_\_\_

Application was received at: \_\_\_\_\_:\_\_\_\_\_ a.m. / p.m.

Amount Allocated to program/event/initiative: \$ \_\_\_\_\_ . \_\_\_\_\_

Has a room reservation been confirmed? [ ] Yes [ ] No

## **NOTES:**

# Prove It! Fund Program Evaluation Form

**Attention Applicant:**

Event Evaluation is due within **one week** of event. Attach advertisements, Towerlight articles, or related publicity items. If items are not attached, funding will not be transferred to your group's account. All publicity must say "Co-Sponsored by the Prove-It! Fund."

**Student / Student Organization:** \_\_\_\_\_

**Program / Event / Initiative Title:** \_\_\_\_\_

**Event Logistics:**

Program date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Program time: \_\_\_\_:\_\_\_\_ a.m. / p.m.

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

Total Attendance: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone number: ( \_\_\_\_ ) - \_\_\_\_ - \_\_\_\_

E-mail address: \_\_\_\_\_

**Budget Breakdown** (please provide the final amount spent in each of the following areas and the total):

Talent:	\$ _____ . _____
Publicity:	\$ _____ . _____
Refreshments:	\$ _____ . _____
Equipment:	\$ _____ . _____
Miscellaneous:	\$ _____ . _____
<b>TOTAL:</b>	\$ _____ . _____

**Funding received from others** (attach additional sheets if necessary):

Source 1: _____	Total: \$ _____ . _____
Funds used for: _____	

Source 2: _____	Total: \$ _____ . _____
Funds used for: _____	

**Promotional Methods Used** (please describe all event promotion done through flyers, Towerlight, etc.):

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

Was this program successful? [ ] Yes [ ] No    Would you recommend repeating this program? [ ] Yes [ ] No

Was the "Prove It!" Fund helpful in planning and completing your program? [ ] Yes [ ] No

**\*\*If you answered NO to any of these questions please provide a brief description as to why on another sheet\*\***