

CEAE Student Group Funding Committee

CEAE Student Group Funding Application Fall 2018

Name of Organization: _____

Organization Contact and Contact's Position: _____

Organization Contact's Email: _____

Organization's CEAE Department Advisor: _____

Advisor's Email: _____

Amount being requested from CEAE: _____

If there is a significant difference, please give a brief explanation: _____

Are you planning to apply for FAC Funding: YES NO

What do you intend to use the funds for? _____

Number of active members: _____

Number of active members that are CEAE students: _____

Number of CEAE students per class: Grad. _____ Sr. _____ Jr. _____ Soph. _____ Fr. _____

If your group's membership is heavily skewed toward a certain age group, please explain why and any measures that you have taken to change this: _____

Event/project #1 **Event/project name:** _____

When is the event/project? _____

How does the event/project further CEAE Student Group Funding Committee's mission? _____

Number of CEAE students participating: _____

Event/project #2 **Event/project name:** _____

When is the event/project? _____

How does the event/project further CEAE Student Group Funding Committee's mission? _____

Number of CEAE students participating: _____

Event/project #2 **Event/project name:** _____

When is the event/project? _____

How does the event/project further CEAE Student Group Funding Committee's mission? _____

Number of CEAE students participating: _____

Event/project #4 **Event/project name:** _____

When is the event/project? _____

How does the event/project further CEAE Student Group Funding Committee's mission? _____

Number of CEAE students participating: _____