



Student Organization Budget Request **Fall 2009**

In order to request funding, you must do the following:

- Complete all of the attached “Budget Request Forms”
- Obtain proper signatures (President, Treasurer, Advisor)
- Attach all necessary documentation (invoices, cost summary, etc.) for each budget request item
- You must map out your budget request for **the entire semester**
- SAS **does not** approve individual events
- SAS **does not** fund entire student organizations budgets
- Student organizations must raise money on their own efforts in addition to requesting funding from SAS
- The following are examples of approved requests:
 - Requests that benefit as many students as possible
 - Serves the interest of the diverse student population which pays the student activities fee
 - Relates to the purpose of the group (a.k.a. ties back to the mission statement)
- Deadline for Budget Request = September 23, 2009
- Questions? Contact Mary Resop at SAS
mresop@umd.edu or 301.738.6083

This form must be completed and submitted to:

Office of Student Services
9636 Gudelsky Drive
Rockville, MD 20850
Phone (301) 738 - 6000 Fax (301) 738 - 6070
shadygrove@umd.edu

Student Organization Budget
Fall 2009

Organization Name: _____

Mission Statement: (please attach as a separate page, as stated in your constitution)

Treasurer Name: _____

Phone: _____ Email: _____

Signature: _____ Date: _____

President Name: _____

Phone: _____ Email: _____

Signature: _____ Date: _____

Advisor Name: _____

Phone: _____ Email: _____

Requests (in order of priority)	Total Cost	Amount Requested	Amount Allocated (SAS Staff Use)
Event or Item #	\$	\$	
Event or Item #	\$	\$	
Event or Item #	\$	\$	
Event or Item #	\$	\$	
Event or Item #	\$	\$	
Total Cost	\$	\$	

Attach DETAILED PRICING SUMMARY FOR EACH EVENT/ITEM REQUEST
(i.e. receipts, invoices, documentation, etc.)
In addition to completing the event/item breakdown worksheet

Event/Item Breakdown Worksheet

1. Event Name: _____ Date & Time: _____ Event rank: _____

Type of Event: (educational, social, academic, recreational, etc) _____

Purpose of Event:

Description of Event in Relation to Mission Statement:

Anticipated Attendance: _____ Event Location: _____

Event is Open to: Members Only ___ USG Community ___ Public ___

Admission Charge? YES NO Admission Amount: \$ _____

Additional Sources of Funding for This Event: _____

Event/Item 1 Budget Breakdown—

Expense Item 1	Expected Total Cost	Amount Requested From OSS	Allocated Amount (OSS use only)
Cost Quote Information:			
Expense Item 2	Expected Total Cost	Amount Requested From OSS	Allocated Amount (OSS use only)
Cost Quote Information:			
Expense Item 3	Expected Total Cost	Amount Requested From OSS	Allocated Amount (OSS use only)
Cost Quote Information:			
Summary Event/Item 1	Total Expected Cost of Event 1	Total Amount Requested From OSS	Total Allocated Amount (OSS use only)

Event/Item Breakdown Worksheet

2. Event Name: _____ Date & Time: _____ Event rank: _____

Type of Event: (educational, social, academic, recreational, etc) _____

Purpose of Event:

Description of Event in Relation to Mission Statement:

Anticipated Attendance: _____ Event Location: _____

Event is Open to: Members Only ___ USG Community ___ Public ___

Admission Charge? YES NO Admission Amount: \$ _____

Additional Sources of Funding for This Event: _____

Event/Item 2 Budget Breakdown—

Expense Item 1	Expected Total Cost	Amount Requested From OSS	Allocated Amount (OSS use only)
Cost Quote Information:			
Expense Item 2	Expected Total Cost	Amount Requested From OSS	Allocated Amount (OSS use only)
Cost Quote Information:			
Expense Item 3	Expected Total Cost	Amount Requested From OSS	Allocated Amount (OSS use only)
Cost Quote Information:			
Summary Event/Item 2	Total Expected Cost of Event 1	Total Amount Requested From OSS	Total Allocated Amount (OSS use only)

Event/Item Breakdown Worksheet

3. Event Name: _____ Date & Time: _____ Event rank: _____

Type of Event: (educational, social, academic, recreational, etc) _____

Purpose of Event:

Description of Event in Relation to Mission Statement:

Anticipated Attendance: _____ Event Location: _____

Event is Open to: Members Only ___ USG Community ___ Public ___

Admission Charge? YES NO Admission Amount: \$ _____

Additional Sources of Funding for This Event: _____

Event/Item 3 Budget Breakdown—

Expense Item 1	Expected Total Cost	Amount Requested From OSS	Allocated Amount (OSS use only)
Cost Quote Information:			
Expense Item 2	Expected Total Cost	Amount Requested From OSS	Allocated Amount (OSS use only)
Cost Quote Information:			
Expense Item 3	Expected Total Cost	Amount Requested From OSS	Allocated Amount (OSS use only)
Cost Quote Information:			
Summary Event/Item 3	Total Expected Cost of Event 1	Total Amount Requested From OSS	Total Allocated Amount (OSS use only)

Event/Item Breakdown Worksheet

4. Event Name: _____ Date & Time: _____ Event rank: _____

Type of Event: (educational, social, academic, recreational, etc) _____

Purpose of Event:

Description of Event in Relation to Mission Statement:

Anticipated Attendance: _____ Event Location: _____

Event is Open to: Members Only ___ USG Community ___ Public ___

Admission Charge? YES NO Admission Amount: \$ _____

Additional Sources of Funding for This Event: _____

Event/Item 4 Budget Breakdown—

Expense Item 1	Expected Total Cost	Amount Requested From OSS	Allocated Amount (OSS use only)
Cost Quote Information:			
Expense Item 2	Expected Total Cost	Amount Requested From OSS	Allocated Amount (OSS use only)
Cost Quote Information:			
Expense Item 3	Expected Total Cost	Amount Requested From OSS	Allocated Amount (OSS use only)
Cost Quote Information:			
Summary Event/Item 4	Total Expected Cost of Event 1	Total Amount Requested From OSS	Total Allocated Amount (OSS use only)

Event/Item Breakdown Worksheet

5. Event Name: _____ Date & Time: _____ Event rank: _____

Type of Event: (educational, social, academic, recreational, etc) _____

Purpose of Event:

Description of Event in Relation to Mission Statement:

Anticipated Attendance: _____ Event Location: _____

Event is Open to: Members Only___ USG Community___ Public___

Admission Charge? YES NO Admission Amount: \$_____

Additional Sources of Funding for This Event: _____

Event/Item 5 Budget Breakdown—

Expense Item 1	Expected Total Cost	Amount Requested From OSS	Allocated Amount (OSS use only)
Cost Quote Information:			
Expense Item 2	Expected Total Cost	Amount Requested From OSS	Allocated Amount (OSS use only)
Cost Quote Information:			
Expense Item 3	Expected Total Cost	Amount Requested From OSS	Allocated Amount (OSS use only)
Cost Quote Information:			
Summary Event/Item 5	Total Expected Cost of Event 1	Total Amount Requested From OSS	Total Allocated Amount (OSS use only)