

Student Club/Organization Recognition Renewal/Budget

Club Meeting dates/times: _	Club Meeting location:(year)				
Name	Club position	Email address	Cell phone number		
emester Goals:					
2					
3					
ommunity Service Project	i				
approximate number of cu	rrently active membe	rs:			
	-		situ Student Club er		
•		gnized as a Frederick Commur nment Association's Student C			

Attached is:

Recognition Policy.

Club/Organization Name:

- 1. A list of proposed changes to our constitution, if necessary (please attached a typed list of changes)
- 2. A list of tentatively planned activities and meetings for the next school year.
- 3. A completed Budget Request Form.

We affirm that the constitution, bylaws, policies, regulations, and practices of our club/organization do not restrict membership on the basis of race, creed, national origin, sex, age, disabilities, or sexual orientation. Further, we affirm that the active membership of the campus club/organization has authority, independent of any national organization to determine membership in the campus affiliate.

Event/Activity	Date	Purpose/Goal of Event (circle one)	Please provide a detailed list of what you are requesting funds for	Vendor/Store	Total Requested	Are you requesting transportation for this event/activity?
		Service Project				
		 Recruitment 				
		Social Activity				
		Educational				
		Leadership				
		Development				
		• Other:	Number of Anticipated Participants:			
		Service Project	Number of Anticipated Participants.			
		Recruitment				
		Social Activity				
		Educational				
		Leadership				
		Development				
		Other:				
			Number of Anticipated Participants:			
		 Service Project 				
		 Recruitment 				
		 Social Activity 				
		 Educational 				
		• Leadership				
		Development				
		• Other:	All orders of Autoback all Bandada and			
		- Comico Ducia et	Number of Anticipated Participants:			
		Service ProjectRecruitment				
		RecruitmentSocial Activity				
		Educational				
		Leadership				
		Development				
		Other:				
			Number of Anticipated Participants:			
Total Amount Requested:						

Total Amount Approved: *to be completed by the SGA VP of Finance

Approval:

Club Advisor	date
SGA Vice President for Finance	date
Coordinator of Student Leadership & Service	date