

MUHLENBERG COLLEGE
OFFICE OF STUDENT ACTIVITIES
Co-Curricular Program Funding Application

Requestor's Name _____ Today's Date _____

Requestor's Phone Extension _____ Requestor's Email _____

Proposed Event _____ Date _____ Time _____

Location for Event _____ Has space been reserved? _____

Affiliated Course(s) _____

Objective of the activity: _____

How will you assess whether the objective of the activity has been fulfilled? _____

Program's relevance to class and/or Muhlenberg community _____

Anticipated number of participants _____

Will event occur without funding from Student Activity Office? _____

FUNDING REQUEST:

Note: Funding limit is \$1,000; however, some special exceptions can be made.

I am requesting funds for:

_____ Food Amount _____

_____ Film/movie rights Amount _____

_____ Travel Amount _____

_____ Speaker Amount _____

_____ Other** Amount _____

** Please Explain _____

Total Funds Requested: _____

Total Funds Approved: _____ (For Office Use Only)