



making things happen...

Student Activities / Student Senate Office
Siek Campus Center, Room 210
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(518) 629-7348 phone / (518) 629-7496 fax
(518) 629-HVCC / www.hvcc.edu

SPECIAL PROJECTS FUNDING REQUEST

Club Name: \_\_\_\_\_

Advisor(s): \_\_\_\_\_

Description of Event: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Place: \_\_\_\_\_

Purpose \_\_\_\_\_

Number of Participants: Students \_\_\_\_\_ Chaperones \_\_\_\_\_

Funding Request/Itemization:

Table with 5 columns: Description, Quantity, Unit, Price, Amount. Multiple rows for itemization.

TOTAL AMOUNT REQUESTED: \_\_\_\_\_

Signature of Requesting Party: \_\_\_\_\_