

Special Appropriations Application

ASSOCIATED STUDENTS OF THE UNIVERSITY OF WASHINGTON
SPECIAL APPROPRIATIONS COMMITTEE



REQUIRED:

Attach an Event Budget Planning Worksheet listing all expenses for this event, whether estimated or confirmed. Attach most current quotes and estimates from vendors.

Total Amount Requested from ASUW	
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RSO and EVENT INFORMATION

Full RSO Name _____ SAO Adviser _____ Today's Date _____

RSO Officer Name _____ UW Email _____ Phone _____

Event Name _____ Event Date(s) _____

Event Location(s) _____ Name of Speaker/Performer _____

Admission Prices:

Students

Non-Students

Door Sales		
Advanced Sales		

Description of Event:

Description of RSOs mission and goals:

Description of student membership within RSO:

Has your RSO received ASUW funding in the past? Yes No

Has your RSO presented this program in the past? Yes No *If YES, please answer the following:*

How many people attended your event?		Where was the event held?	
How many students attended your event?		How much did you charge for admission?	

ANTICIPATED AUDIENCE

Who is your primary audience for this event?

What is the expected attendance at your event?

Undergraduate		Faculty/Staff	
Graduate and Professional		Non-UW	

Application continues on next page.

FUNDING SOURCES

Have you attached the Event Budget Planning Worksheet listing all itemized program costs and financial co-sponsors (including GPSS)? Yes No

CONDITIONS of FUNDING

Please read each condition and check the corresponding box to affirm your agreement.

By accepting funding from ASUW, our RSO agrees to:

Include ASUW logo on all event promotional materials

Verbally announce ASUW as a funder of your event

Admit at least one member of the ASUW Special Appropriations Committee to your event, free of charge

Provide ASUW with the total number of event attendees after the event has occurred

Report to ASUW the total monetary amount of external funding received

Return 15% of the net profits to ASUW to promote the continuation and growth of the Special Appropriations Fund

I certify that I have read and will abide by the policies for the ASUW Special Appropriations.

RSO Officer Name & UW Email

Date

FOR OFFICIAL USE ONLY

ASUW ENTITY	AMOUNT APPROVED	DATE APPROVED
Special Appropriations		
Board of Directors		

ASUW Finance and Budget Director Approval

Date

SAO Adviser Approval

Date

Project Code