Request for Developmental Grant
Segregated University Fee Allocation Committee
University of Wisconsin – La Crosse Student Association

Submit this form to the Segregated University Fee Allocation Committee through the Office of Student Activities, 212 Cartwright Center, (608) 785-8888. Please attach additional pages and supporting documents to answer each question, a copy of the organization’s by-laws, and a proposed budget.

Entity Name: ____________________________________________

Submitter: ______________________________ Email: ______________________________

Advisor: ______________________________ Email: ______________________________@uwlax.edu

In order to be eligible for funding, this entity must be a Recognized Student Organization (RSO).
Is this entity an RSO, acknowledged by the Student Association?
☐ Yes ☐ No

Has this organization received funding in the past by SUFAC?
☐ Yes ☐ No If Yes, explain why it no longer receives funding:
__________________________________________________________________________________
__________________________________________________________________________________

Please attach a detailed explanation for the following:

What is the objective of this organization? Also, how does this group benefit students at UW-L?
Who is able to join this organization and attend the functions?
Does this organization stand to generate revenue or fundraise during the year?
Briefly explain the need for Developmental Grant funding.
Provide a detailed description of activities planned and how the money will be used.
Provide a detailed description of activities held previous to this funding request; include source of funds.

Using the appropriate account descriptions (available on the SUFAC website), please attach a detailed budget for the current fiscal year and a budget plan for three consecutive years thereafter. Please budget assuming funding will start one month from the date of submittal.

Please attach a copy of your organization’s by-laws.

You will be required to present this application to SUFAC at the earliest meeting date. You will be contacted by the chairman of the committee to arrange a time.

Submitted by: ______________________________
Submitter

____________________________
Advisor Signature

For more information, visit: http://www.uwlax.edu/studentassoc/student-senate/Committees/sufac.htm