

## Associated Students of Gavilan College Budget Request Form



Student Center • 5055 Santa Teresa Blvd. Gilroy, CA 95020 • (408) 848-4777

To request financial support from ASGC, please **complete this form** and submit at least three (3) weeks prior to event. The requestor or a representative must be present at the ASGC Senate meeting when this request is to be considered. *Priority consideration is given to current ASGC card holders*.

1. Check the semester in which the funds will be used.

		Spring 2018
2.	Date of Request: February 21, 2018	
3.	Name of person requesting the funds: Jennifer Nari	
4.	Name of organization/department/club: Rho Alpha Mu	
5.	Contact phone number: (408) 848-4897	
6.	Contact email address: jnari@gavilan.edu	
7.	Purpose of request (i.e. play reading series, breast cancer awareness, etc.):	
	Conference fee for students to attend the Alpha	Gamma Sigma Spring Convention
8.	Amount requested: \$_500 Needed by: _]	March 7, 2018
Describe	how the funds will be used. Attach additional docume	entation as needed.
	ng on room arrangements). Attendance is require statewide organization.	ed in order to remain in good standing
Date req	uest was received by ASGC: by:	ACCOM 1
		ASGC Member
Approve	d by ASGC on	_
ASGC P	resident:	Date:
ASGC A	dvisor:	Date: