Name of CSU Committee(s): ____________________________________________
Name of Committee(s) Representative: __________________________________
E-mail: ____________________________________________________ Phone: ________________________

Activity/Expense: ___________________________  Date Expenses Incurred: _____________________
Amount Requested: ___________________________  Expected Activity Date (if applicable): _________

Along with this form, please submit:
- The purpose of the requested funding
- An explanation of the activity or expense
- An itemized list of expenses that will be incurred

Before submitting this form, you must read the CSU Funding Policies- Representative Use of CSU Funds and Guidelines for Use of CSU Funds for Undergraduate Student Organizations in their entirety. They can be found at www.creighton.edu/csu, or you may request a copy from the VP for Finance.

I have completely read and fully understand all CSU Funding Policies noted above. I understand that all Guidelines for Undergraduate Student Organizations apply to Representative Funding with the exception of deadlines stated. I understand that violation or non-compliance with CSU Funding Policies will jeopardize my group’s opportunity to receive CSU funds, and I have fully disclosed any funding policies that have already been violated by my group. I am also aware of how the process works and all the relevant deadlines. I understand that I have the option to be present at the review of the request if I believe my presence will influence the decision. I will incur the approved expenses as instructed by the Vice President for Finance.

_______________________________________
(Signature of Representative)

Please return this form and all of the required components to the Student Activities Office by **Monday by 5:00 PM** and at least **5 academic school days prior** to the projected date your expenses will need to be incurred. The Executive Committee operates on the university calendar and is in recess during all university breaks, and during the summer. Requests will not be reviewed when the Executive Committee is not in session.

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**Office Use Only**

Request #___________

Date Submitted: _______________

Date Reviewed: _______________

Date of Decision: _______________

Decision: Veto  Approved  Denied  Hold

Approved Amount: _______________

Additional Information: __________________________________________________________

VP for Finance: __________________________________________  Date: __________