



Budget Submission Form

Graduate Student Organization

Thank you for your interest in acquiring GSG funds for your student organization. Please complete this form, all of the required components, and submit to the GSG Treasurer by the third Monday of the semester. Please be aware that all student organizations are required to turn in End of Semester Reports accompanied with original receipts by a date to be set by the GSG Treasurer. All contact between GSG and the student organization representative occurs through email.

Name of Student Organization: \_\_\_\_\_

Name of Organization's President: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of Organization's Treasurer: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

FALL SPRING Year: \_\_\_\_\_ Amount Requested: \_\_\_\_\_

Creighton Federal Account #: \_\_\_\_\_ Current Balance: \_\_\_\_\_

Will alcohol be served at any of your events? YES NO \*if yes, please follow all SAO guidelines

By initialing below, you indicate that you have included the following:

- \_\_\_\_\_ An itemized list of anticipated expenses for the year. Assets (items that cannot be completely consumed in this school year) and purchases made with non-GSG funds must be categorized and included as well
\_\_\_\_\_ A complete list of all anticipated sources of revenue (including dues, donations, and fundraising)
\_\_\_\_\_ A complete roster of current members
\_\_\_\_\_ A list of anticipated events and activities with descriptions of each, including expenses

Before submitting this form, you must read the GSG Funding Policies for Student Organizations in their entirety. They can be found at www.creighton.edu/gsg or you may request a copy from the GSG Treasurer. If you have any questions regarding the policies, please contact the GSG Treasurer whose contact information is above.

Please sign up for a time to meet with the Executive Committee when you submit this form.

I have completely read and fully understand all GSG Funding Policies. I understand that violation or non-compliance with GSG Funding Policies will jeopardize my organization's opportunity to receive GSG funds, and I have fully disclosed any funding policies that have already been violated by my organization. I am also aware of the funding process and all relevant deadlines. I understand my organization is not guaranteed funding and additional information might be required for an allocation to be made.

Representative \_\_\_\_\_ Date \_\_\_\_\_ Moderator \_\_\_\_\_ Date \_\_\_\_\_

OFFICE USE ONLY
Date Received: \_\_\_\_\_
GSG Treasurer's Initials: \_\_\_\_\_
Revised 6/7/13