GUSA Finance & Appropriations Committee

**FY19 Budget Summit**

Student Activity Fee Funding Application

(APPLICATION B- For Non-Advisory Boards)

Please email this application and accompanying materials to gusafinanceandappropriations@gmail.com by **Friday, February 14, 2020 at 5:00 pm.**

**PART A.**

Name of Organization:

Mission of Organization:

GMS Worktags:

**PART B.**

Please fill out the Application B Financial Information excel and attach to your submission email.

**PART C.**

Please answer the following questions in detail and provide any relevant documents:

1. Describe the program/project you would like to fund, implement or enhance.
2. In what ways does this program/project enhance student life at Georgetown  
   University? How many students will it affect?
3. What funding sources currently support this program? Will these sources continue to provide funding at the same level this year? What other sources have been explored before coming to GUSA?
4. Will this program comply with all University policies?
5. What level of financial risk does this project entail?
6. In what way will this program/project expand or relieve a financial burden on  
   students participating in this program?
7. How are decisions made about the direction of this program? How are students  
   involved in the decision making process?
8. What is the long-term financial impact of this project? Will there be ongoing  
   maintenance costs?
9. Will this program need more money in future years? To the best of your ability  
   provide information on project costs for the next two years.
10. Has your organization/group previously applied to the Budget Summit? How much was the organization allocated? How was it used?

**CERTIFICATION:**

By signing below, I hereby certify that the information enclosed is accurate to the best of  
my knowledge.

**Funding Request Form Submitted By:**

**Name of Group Student Chair:**

**Signature (type your name):**

**Name of Group Advisor:**

**Signature (type your name):**

**Date:**

**Contact Email:**

**Contact Phone Number:**