
BUCKNELL

Bucknell Student Government
Appropriations Committee

Box C2909
Bucknell University
Lewisburg, Pennsylvania 17837
Phone (717) 524-3150

APPEALS FORM INSTRUCTION SHEET

The appeal form is to be used only if a club does not agree with the Appropriations Committee's decision regarding funding. The difference between what was initially requested and what was appropriated should constitute what is being appealed.

Simply fill in the following:

- SECTION A: The organization's name, its president, treasurer, and advisor. Also, estimate the number of members who will actively join your club.
- SECTION B: Simply fill in the name of your club and the date on which the initial request was presented. Then check one of the two boxes indicating whether the request came from your original budget or from an addition to the original budget.
- SECTION C: This section should describe precisely what you are appealing. If more than one item is being appealed, please list them in order of preference. Indicate next to each item the amount originally requested and the amount originally appropriated. Total both columns and place the difference in SECTION D.
- SECTION D: Simply enter the total amount your club is appealing.
- SECTION E: The signatures of the preseedent, treasurer, and advisor of the club is required. Before presenting the appeal to the Appropriations Committee, your club must also obtain the signature of the AC member who is responsible for auditing your club. If your club does not know who the auditor is, the president of the club must contact the BSG Treasurer and obtain his/her signature.

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APPEALS FORM

Date Filed

- A. Name of Organization _____
Name of Chief Officer _____
Name of Treasurer _____
Name of Advisor _____
Estimated Membership _____

- B. _____ is appealing a decision made by the

Name of Club

Appropriations Committee on _____ concerning:

Date

() Original Appropriations.

() Additional Appropriations.

- C. Explain, precisely, the item(s) your club is appealing. Include the amount(s) originally requested and the amount(s) originally appropriated.

Reason for appealing

Amt. originally
requested

Amt. originally
appropriated

- D. Total amount appealing: \$ _____

- E. We, the undersigned, have read and understand the AC Guidelines.

Chief Officer

Treasurer

Advisor

Auditor

RETURN TO BUCKNELL STUDENT GOVERNMENT BOX C-2909