

Stony Brook University
Office of Student Activities
APPLICATION FOR PERMISSION TO FUNDRAISE ON CAMPUS
Undergraduate Student Government Clubs/Organizations

Sponsoring Organization(s): _____

Program Advisor: _____

Event Name: _____

Event Location: _____ **Event Date:** _____ **Event Time:** _____

Event Description:

Contact Person: _____ **Phone:** _____ **E-Mail:** _____

Address: _____

Name of Organization Receiving Funds: _____

Address: **Phone:** _____
Fax: _____

Provide a brief description of Fundraiser:

Total Expected Revenue: _____

The undersigned officers of the above mentioned organization(s) agree to abide by University fund-raising policies and the conditions of the plans outlined above.

Name (Print)	Signature	Position	Date
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NOTE: The sponsoring group will need to have the organization receiving the donation send a letter to The Office of Student Activities acknowledging that they are aware the sponsoring group intends to make a donation. This letter can be faxed to (631) 632-6756, Attn: Director for Student Activities or Assoc. Director of Campus Recreation if its a Sports Club.

For Office Use Only:

Approval: _____ **Denial:** _____

_____ Assoc. Director of Campus Recreation / Director for Student Activities	_____ Date
_____ USG Treasurer	_____ Date
_____ USG Administrative Director	_____ Date

Comments/ conditions of approval: _____

Is Approval from Faculty Student Association required? Yes ___ No ___

	_____ Signature	_____ Date
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FOR FUND-RAISERS OVER \$500.00:

_____ Vice President for University Affairs	_____ Date
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