



University of Massachusetts Lowell
Graduate School Association
Budget Proposal Form

***Must be Submitted 2 weeks before the monthly meeting. ***

Date of Submission: _____

Graduate Club/Organization: _____

Primary Contact Person: _____ **Phone Number:** _____

E-mail Address: _____

Event Name: _____

Date of Event(s): _____

Location of Event(s): _____

Amount of Money Requested: _____

*Has your club used its seed money yet this year? ** Yes _____ No _____*

If no, will your club be using its seed money toward this event's funding? Yes ___ No ___

***To receive seed funds, clubs must be registered by September 30th. ***

Has your club received money already this year? _____ Yes _____ No

If yes, how much of that allotment is remaining? \$ _____

Will there be an admission charge for this event? Yes ___, \$ _____, No _____

Are there any other sources of funding for this event? (ie. club funds)

Please describe the event(s) in 250 words or less:

Breakdown of the Budget Request: (or submit a proposed budget)

<u>Item Name</u>	<u>Price per Item</u>	<u>Quantity</u>	<u>Item Total Price</u>

Please list any other previous events sponsored by this club/organization:

Please list any other planned activities for the year:

Submitted By: _____

Signature: _____

GSA Approval: Yes No Amount Allocated: _____

GSA Signature: _____

Notes: