

Student Organization Social Programming

GEORGE MASON UNIVERSITY

CO-SPONSORSHIP FORM

Primary Organization Name			
Co-Sponsoring Org Name #1			
Co-Sponsoring Org Name #2			
Program Title			
Program Dates		Event Location	

Primary Organization Requested Amount: \$ _____

Co-Sponsoring Organization #1 Requested Amount: \$ _____

Co-Sponsoring Organization #2 Requested Amount: \$ _____

Primary Organization's Role in the Event

Co-Sponsoring Organization #1's Role in the Event

Co-Sponsoring Organization #2's Role in the Event

For Student Activities Use Only

Date Reviewed:	Amount Approved:	Approval Vote Count:
Date Organization Notified:		

Conditions (if applicable): _____
