

Student Organization Social Programming

GEORGE MASON UNIVERSITY

Primary Organization's Name			
Co-Sponsoring Orgs' Names (if applicable)			
Org Number		Phone Number	
Contact Name		Contact Email	
Second Contact Name		Contact Email	

Sum of SP-2 Form	\$	# of Active Members	
Sum of Co-Sponsor Form	\$		
Total Funds Requested	\$		

Alternative Sources of Funding (please provide specific explanation and estimated amount <u>and</u> include funds received from the Student Funding Board)	
<p>- Current Balance in SGR: \$ _____</p> <p>- Full SFB Allocation for current semester: \$ _____</p> <p>- # of Programs submitted to SFB for approval: _____</p>	

Proposed Event Description and Goals / How is this event important to the Mason community?