



# STUDENT FUNDING BOARD

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## OFFICE OF STUDENT ACTIVITIES

### COVER SHEET (PAGE 1)

#### I. FUNDING GUIDELINES

**General Rules/Guidelines for Funding of all requesting organizations:**

- All Recognized Student Organizations are eligible to receive a maximum of \$3,500 per semester with a cap of \$5,000 per year.  
Funding requests can be made within the following categories:
  1. Conferences/ Leadership Programs/ Competitions
  2. Revenue Generating Events (Maximum Allocation of \$1,000 per semester)  
Per Administrative Policy No.6 "All funds generated by the activity, whether from use of student fees or from other sources, must be deposited into and expended through the university account of that activity"  
*Money collected cannot be donated to any individual or organization (this includes non-profit organizations)*
  3. Non-Revenue Generating Events
  4. Newsletter/Publications
- Office Supplies may be requested once per academic year. The Maximum Allocation for this will be \$100 per ACADEMIC YEAR. This allocation *is* considered part of the \$3,500 maximum per semester.
- National Dues/National Insurance may be requested by organizations. The Maximum allocation for this will be \$500 per ACADEMIC year. This allocation *will not* be considered part of the \$3,500 maximum per semester.

#### II. REVIEW PROCESS

- The SFB committee will review requests every 2 weeks.
- Responses will be provided to applicants via email by the SFB Chair within 2-3 weeks after the deadline, please do not contact prior to 3 week turn around period.

#### III. APPLICATION

In order to be considered for funding, all application packets must include the following items:

- Signed/Initialed Student Funding Board Coversheet (pages 1 and 2)
- TYPED SFB-1 (only complete first box if only requesting office supplies or national dues/insurance)
- TYPED SFB-2 (*submit one SFB-2 form for each program*).
- If applicable, TYPED Co-sponsorship Form.
- If applicable, TYPED Series of Events Form
- Event Evaluation Form, **Submitted after the event has taken place**
- All relevant & supporting documents (invoices/contracts, etc.)

Organization President(s), initial here (*each President*): \_\_\_\_\_

**Submit completed application packets to:**

Student Funding Board  
Office of Student Activities  
George Mason University  
Student Union Building I, Room 101

*Student Funding Board*

*MSN 2D6, 4400 University Drive ♦ Fairfax, Virginia 22030-4444*

*PHONE: 703.993.2909 ♦ FAX: 703.993.4566 ♦ E-MAIL: [sfb@gmu.edu](mailto:sfb@gmu.edu) ♦ WEB: [http://sa.gmu.edu/student\\_orgs/sfb](http://sa.gmu.edu/student_orgs/sfb)*

# STUDENT FUNDING BOARD COVER SHEET (PAGE 2)

## IV. APPLICATION PROCESS & DEADLINES

All Student Funding Board requests must be submitted by 5:00 pm on the event deadline prior to the event. Awards for approved programs will be announced 1-2 weeks after the review session. Deadlines are:

### Spring 2008

*For programs occurring between Jan. 22<sup>nd</sup> – Feb. 29<sup>th</sup>*

Deadline: November 30, 2007

*For programs after February 29*

Deadlines: Feb. 1<sup>st</sup> & Feb. 15<sup>th</sup>

Feb. 29<sup>th</sup> & March 14<sup>th</sup>

March 28<sup>th</sup> & April 11<sup>th</sup>

*For programs occurring between July 1, 2008 – September 30, 2008*

Deadline: April 25<sup>th</sup>

***Note: Review of Applications take place the following week after each deadline only.  
Depending on when you submit, there could be a 2-3 week turn around time for a response.***

## V. SIGNATURES

By signing below, you agree that all information provided within this packet is complete and accurate. Furthermore, as President of your respective recognized student organization, your signature indicates the approval of your membership to complete this application on behalf of the organization and the approval of your membership to be a co-sponsor of this program (when applicable).

\_\_\_\_\_  
Signature of Organization President

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Name of Organization #1

\_\_\_\_\_  
Signature of Co-sponsoring Org President *(if applicable)*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Name of Organization #2

\_\_\_\_\_  
Signature of Co-sponsoring Org President *(if applicable)*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Name of Organization #3

\_\_\_\_\_  
Signature of Organization Primary Faculty/Staff Advisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name