

Requestor:
Requesting Organization:
Contact Information:
Council Sponsor:

# Funding Request Application

## Associated Graduated Students

University of California, Irvine



### General Program Information

Program/Event Name: \_\_\_\_\_

Description of Program:	Location: _____
	Date: _____
	Time: _____

### Merit Evaluation

Target Audience	AGS Previous Funding		Other Funding	
<u>Attendance</u> <u>Funding for</u>	Yes	No	Yes	No
Graduate Students:    _____    _____	Date: _____	Amount: _____	Source _____	Amount: _____
Undergraduates:    _____    _____	_____	_____	_____	_____
Admin/Faculty/Staff:    _____    _____	_____	_____	_____	_____
Other: _____	_____	_____	_____	_____
			_____	_____
			_____	_____
			_____	_____

Planned Methods of Advertisement:

### Request and Budget

Requested From AGS: _____	Itemized Budget	
<b>Totals</b>	Items w/ Description and Quantity	Cost
Other Funding: _____	_____	_____
Expected Costs: _____	_____	_____
Outstanding: _____	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____

**AGS Requirements For All Funding Recipients**

1. Display the AGS Logo on advertisements and at event.
2. Save your receipts so AGS can reimburse you. Contact [vpfinance@ags.uci.edu](mailto:vpfinance@ags.uci.edu) for more information.
3. If distributing prizes that AGS is paying for, have the recipients sign a receipt to give to AGS.
4. Provide photographs, testimonies, fliers, etc. (if possible) from your program/event to be used for name recognition purposes by AGS