



# Spring 2021 Request for ASCOM Funding Form

Return this **COMPLETED** form to the office of Student Activities and Advocacy, [studentactivities@marin.edu](mailto:studentactivities@marin.edu)

**PLEASE NOTE: ASCOM CANNOT FUND GIFT CARDS OR RAFFLE ITEMS.**

Date Submit: \_\_\_\_\_ Organization/Club Name: \_\_\_\_\_

Contact person: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Dollar amount being requested: \$ \_\_\_\_\_

**PROPOSAL:**

1. Describe the purpose of the fundraising request. What will it accomplish?
  
2. If funds are for an event, list the location, date and time (be specific) - \*During COVID-19, if the fundraiser is online, you must provide details on where, when, and how you will implement this fundraiser:
  
3. How will the event be publicized (be specific)?
  
4. List all other community and campus groups, organizations or departments that will be involved in the event and the nature of their involvement:
  
5. What will the funding be used for? Be specific and attach a **detailed budget**.

**OFFICE USE ONLY**

ASCOM Minutes: \_\_\_\_\_

Approved FULL Requested Amount

Approved PARTIALLY Funded Amount \$ \_\_\_\_\_

**NOT** Approved

Reason: \_\_\_\_\_

Tabled

Reason: \_\_\_\_\_

ASCOM Board Member: (print) \_\_\_\_\_ X(sign) \_\_\_\_\_

Director of Student Activities and Advocacy: (print) \_\_\_\_\_

(sign) \_\_\_\_\_