



**Diversity Services Office**  
**Student Organization Program Funding Request**

**Name of Student Organization:** \_\_\_\_\_  
**Event Coordinator:** \_\_\_\_\_  
**Email:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_

**EVENT DETAILS**

**Title:** \_\_\_\_\_  
**Date:** \_\_\_\_\_  
**Time:** \_\_\_\_\_  
**Location:** \_\_\_\_\_

**Brief Description:** \_\_\_\_\_

**Do you want the Diversity Services Office to assist in **MARKETING** this event?**  
Yes or No (Please select one)

**Requirements**

- 1. The event theme should promote diversity at Michigan State University College of Law or other similar academic institution(s) if co-sponsoring with another organization.**
- 2. All funding must be used for event requested on this form. Any excess funds in the amount of \$20.00 must be returned to the Diversity Services Office.**
- 3. The Diversity Services Office must be listed as a “Sponsor” on all marketing materials for the event in which funding is requested.**



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**BUDGET**

**Event Expenses**

Item	Amount
Food (No Alcoholic Beverages)	
Attendee Gifts	
Speaker Gifts	
Audio Visual	
Other	
<b>Total</b>	

**Event Revenue from Other Sources (SBA, Fund Raising):**

Amount: \_\_\_\_\_ Source: \_\_\_\_\_  
Amount: \_\_\_\_\_ Source: \_\_\_\_\_

Amount Requested: \_\_\_\_\_

\_\_\_\_\_  
Signature  
Event Coordinator

\_\_\_\_\_  
Date

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Amount Approved: \_\_\_\_\_  
Date: \_\_\_\_\_  
By: \_\_\_\_\_