

Mount Vernon Nazarene University  
Student Government Association  
**Student Club/Organization Fund Petition Form**

Club/Organization Name: \_\_\_\_\_

President: \_\_\_\_\_ Treasurer: \_\_\_\_\_

Number of Active Members: \_\_\_\_\_ Funding Needed By: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Current Account Balance: \$ \_\_\_\_\_ Amount Requesting: \$ \_\_\_\_\_

Please provide the reason for your funding request:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Outline your organization's goals and learning outcomes pertaining to your funding request:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Has your organization conducted any fundraisers? (circle) YES NO Describe (include outcome):

\_\_\_\_\_  
\_\_\_\_\_

Outline your organization's plans for future programs/initiatives & possible funding requests:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Officer Signature: \_\_\_\_\_ Date Submitted: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Funding petition decision will be communicated via e-mail by SGA to the requesting organization officers.**

Amount Awarded: \$ \_\_\_\_\_ Additional Notes: \_\_\_\_\_

SGA President: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

SGA VP of Community Life: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

SGA VP of Finance: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_