

Office use
only:

FUNDING REQUEST FORM

► For events, conferences,
activities and competitions

Funding Request Form

IMPORTANT:

The Student Association reimburses the cost of approved events after receiving receipts/
invoices. No funding will be paid out in advance.

Contact Information:

Name of Contact:

Email Address:

Name of Supporting Club, Faculty, Staff, or Executive Member:

Email Address:

Date of Submission:

Event Information:

Name of event:

Date & time of event:

Location of event:

Number of affected Students: (check one) 0 – 20 21 – 50 51 – 100 100 +

Number of Student volunteers/workers:

Total expected event cost:	\$
Total expected fundraising:	\$
Total funding requested:	\$

STUDENT ASSOCIATION

of St. Lawrence College (Kingston Campus) • 100 Portsmouth Avenue • Kingston, ON • K7L 5A6
www.SAVoiceSLC.com • T - 613 544 5400 ext. 1502 • E - studentassocitaion@sl.on.ca • F - 613 544 1763

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FUNDING REQUEST FORM 3

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Attached: (check all that apply)

Event Risk Assessment Form
Budget
Supplementary documentation

* If you have any further questions please contact the President at sapresk@sl.on.ca or the Vice President of Finance at savpfink@sl.on.ca.

Please be aware that requests will be evaluated within two weeks of submission to the Student Association. Requests for Events happening within two weeks of submission may not be expedited due to time constraints. Events requiring a Risk Assessment Form must be submitted two weeks before the event.

Date funding required:

Date of event:

Signature:

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