

Texas Southern University
 Division of Student Affairs

Student Fee Allocation Application

Name of Organization	_____	Total Membership	_____
Name of Responsible Person	_____	Title of Resp. Person	_____
Name of Program/Activity	_____	Date of Activity	_____
Telephone Number :	_____	Email Address:	_____

Total student allocation fee request _____

Is membership in this organization/program open to all students? Yes No

Does this program help market the university? Yes No

This program/activity is expected to bring in _____ students in attendance.

Documentation

Organization /Program Profile

(Provide a one page summary of the structure and purpose of this organization/program)

 Signature of President

 Date

 Signature of Advisor

 Date

 Approved Signature of Vice President

 Date

Your packet along with your power point presentation must be delivered to the Student Fee Advisory Committee at the time chosen by your organization. Your packet includes a completed application, one page summary of the program for which you are requesting funds, a completed budget (proposed cost), and a hard copy of the power point presentation.

**Texas Southern
University
Student Services Fee Academic Year 2017-2018**

Purpose:		
Please list your proposed expenditures. This information must be submitted prior to obtaining the approval signature for the funds requested.		
PROPOSED COST: Current and New Recipients 2017-2018		
Program:		
1		
2		
3		
4		
Food:		
1		
2		
3		
4		
Publications: (Flyers, Marketing Materials)		
1		
2		
3		
4		
Apparel:		
1		
2		
3		
4		
Entertainment/DJs:		
1		
2		
3		
4		
Supplies/Decorations:		
1		
2		
3		
4		
		Total:

(Please Print or Type)

Name of Organization: _____

President: _____ **Email Address:** _____

On Campus Advisor: _____ **Phone:** _____

Email Address: _____

Phone: _____

Signature

Title

Date