

# SGA Conference Request Form

Date: \_\_\_\_\_

Organization Name: \_\_\_\_\_

Organization Account #: \_\_\_\_\_

Person(s) representing organization (max. 2): \_\_\_\_\_

E-mail & phone # of contact: \_\_\_\_\_

Date(s) of Conference: \_\_\_\_\_

Location of Conference: \_\_\_\_\_

Total Distance from KU (miles): \_\_\_\_\_

Number of KU undergraduate students attending the conference: \_\_\_\_\_

Will you need lodging? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please specify the name & address of the hotel:

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

Will you need an SGA Vehicle? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please specify how many vehicles: \_\_\_\_\_

(Note: location of conference may not be more than 50 miles from MSU)

If no, please specify your method of transportation: \_\_\_\_\_

<b><u>Total Estimated Costs vs. Amount Requested:</u></b>	
Registration:	\$ _____
Lodging:	\$ _____
Transportation	\$ _____
Other	\$ _____
Total	\$ _____
Requested Amount (1 / 3 of total)	\$ _____

On a separate sheet of paper, please explain how this conference will benefit the organization.

\_\_\_\_\_  
Advisor Signature

\_\_\_\_\_  
Student Treasurer Signature

Return this completed form to the KUSI Service Center (MSU 171) to be scheduled to appear before the Budget & Finance Committee. This form must be fully completed & returned 2 days prior to the regularly scheduled Budget & Finance Committee meeting day in order to be able to attend. NO EXCEPTIONS can be made.