Student Activity Request Form

Must be submitted 2 weeks prior to the date of the proposed activity

Proposed activity: ________________________________________________________________

Date of activity: _______________ Start time: ___________ End time: ____________

Student coordinator(s): __________________________________________________________

Cost to participants: $____ Junior account = ___ % of net proceeds Senior account = ___ % of net proceeds

Additional details (to include supplier of A/V equipment, DJ, food and drink, other materials):

------------------------------------------------- for administrative use --------------------------------------------------

The director will determine faculty chaperones based on rotation and availability

Faculty chaperone 1: ___________________________ Faculty chaperone 2: _______________________ 
Date completed proposal received: ___________ Approved: ___ Not approved: ____