

Fund 10 Organization/Club Budget Application

Advisor Name: _____ Advisor Email: _____

Club Name: _____

Event Name: _____ (to be used for marketing purposes)

Amount Requested from BAT: _____ Club Fund 28 to offset cost _____

Date of event: _____ How many students will this impact? _____

Time of Event: _____

Location of Event: _____

Learning Objective/Purpose:

Item Description	Item Quantity	Cost of item	Total Price of Item
		Request Total:	

Benefit to CLC community and/or Club:

Names of participants (for travel only) ***No club travel will be permitted in the Fall, 2021. Spring, 2021 to be determined. If a conference is offered online/virtual, then the club must attend the conference in virtual form.***

Advisor's Signature:

Email completed form to:
sai.budgetallocationteam@clcillinois.edu

Club President Signature:

Club Treasurer Signature: