

Student Counseling & Wellness Resource Activity/ Budget Form

Student Counseling & Wellness Resource Center Activity form is to be completed by a team member(s) and submitted to the director via DocUsign review by Tuesday at 12:00pm. This form should be submitted no later than three full weeks prior to the planned event. Each line item (i.e. Sodexo, or T-Shirts, Presenters) must include an attached quote and design, if applicable.

- (a) A limited amount of funds will be allocated to support on campus events Student Activity Fee.**
- (b) No more than 20% of the funds of the budget is available to the SCWRC per semester maybe allocated to support campus activities. We can always join with other department to join together to support the efforts.**
- (e) Costs associated with events held or commitments made prior to official approval by the director of SCWRC will not be approved for funding or reimbursement.**

Individual Proposing Activity: _____ Anticipated Attendance: _____

Date if Activity: _____ Time: _____ Location: _____

Collaborating Department(s): _____ Sponsor(s): _____

Requesting Team Member (s): _____

Director's Approval: _____

Brief Summary of Activity:

Objectives, Goals, and Expected Outcome:

How does the Activity support the purpose of SCWRC, as well as increase awareness for mental health?

Please list the how the activity will be advertised and promoted to the entire campus community.

*Line Items	Amount Requested
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
REQUESTED TOTAL	\$ _____

Each line item must have an attached quote to be considered for funding.