

Application for SCAVMA Educational Club Fund

Today's Date: ____/____/____

Date of Event: ____/____/____

Club Name: _____

Contact Person: _____ Class year: _____

Reason for Request: *Please attach a budget of what the funds will be used for.*

Total cost of event(s): \$_____

In the event that the funds awarded are not used in the amount and manner specified, what will the club do with the funds?

Return to SCAVMA

Alternate use: _____

Amount requested from SCAVMA: \$_____

Applicant's signature: _____

Reminder: You are required to attend the Executive Council Meeting at which this application will be considered in order to defend your request.

THIS APPLICATION MUST BE RECEIVED PRIOR TO EVENT(S)

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SCAVMA Authorization

Approved on: _____ by _____

Club Requirements met? _____ (Constitution, SOO, VMSS, etc.)