

# Student Clubs and Organizations - Account Application

## FOUNDATION USE ONLY

Account:  Fund:  Function:  Division:  Officer:  Entity:  School:

- For any questions regarding your account please contact Associated Students, Inc. (ASI).
- Once this form is complete, please submit to Office of Student Life (OSL).
- The account will automatically expire three years from the date of its opening, at which point any remaining funds will be disposed of in accordance with the account application. Account holders must renew their accounts prior to expiration.

## APPLICATION TYPE:

☐ New Account

☐ Close Account

## ACCOUNT INFORMATION

Name of Account

Name College/School or Division

New/Renewal/close date

End Date (Maximum three years)

Describe Source of Funds

Student Club Funds

## ALLOWABLE EXPENDITURES

☐ Community Relations ☐ Stipends ☐ Equipment ☐ Salaries/Benefits ☐ Travel ☐ Other

- A. Were these funds received through a philanthropic grant?
- B. Is the income on this account derived from the use of campus facilities and/or personnel?
- C. Will this account be used solely in connection with sponsored programs or grants
- D. Were these funds received from a closed out grant/contract?

Yes	No
<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>

Please provide a justification/purpose for the account in the box below:

## DISPOSITION OF UNEXPENDED FUNDS

If the account is closed for any reason, state where any remaining funds should be transferred. If no destination is specified and no donor restrictions exist, the disposition of any funds remaining upon dissolution of the account will be left to the discretion of the appropriate Dean or Vice President.

See ASI Bylaws

## PREPARED By (If preparer is an authorized signer, preparer must also sign below)

Name

Email

Phone

## AUTHORIZED ACCOUNT SIGNERS

Student Organization President

Signature

Student ID#

Date

Email

Student Organization Treasurer

Signature

Student ID#

Date

Email

Add'l Student Organization Member (Not Required)

Signature

Student ID#

Date

Email

## Student Clubs and Organizations - Account Application

### ***AUTHORIZED STUDENT ADVISOR***

Name (Print)

Signature

Date

### ***AUTHORIZED OSL REPRESENTATIVE***

Name (Print)

Signature

Date

### ***ACCOUNT DIRECTOR/OFFICER ASI***

Name (Print)

Signature

Date

### ***AUTHORIZATION BY UNIVERSITY CFO***

If the account is for a Vice President, the President should sign in the VP area below.)

University Chief Financial Officer

Signature

Date

### ***AUTHORIZATION BY FOUNDATION***

Foundation Approval

Signature

Date