

ASUO Senate Special Request Form

Group Name: PSA Phone Number: 346.4099
 OS Number: 050947 Applicant's Email: emcglad@uoregon.edu
 Requested Hearing Date: _____ Is your Program Recognized by ASUO: YES NO
 Amount Requested: 150.00 Is your Program Currently Fee Funded: YES NO

(Below Box for Controller's use only)

Type of Request:				
<input checked="" type="checkbox"/> Authorize Spending within Group		<input type="checkbox"/> Authorize Spending from Surplus		
<input checked="" type="checkbox"/> Release Food Holding		<input type="checkbox"/> Authorize Spending from Over-Realized		
<input type="checkbox"/> Create New Line Item				
FROM Name of Activity	Current Balance in FROM Activity	TO Name of Activity	Current Balance in TO Activity	Current Balance in G, E, N, & U (Fundraising)
PA Staff Retreat	150	—	—	\$12,711.00
Controller's verification of account balances (required): _____				
Signature and ASUO Seal				Date

A. If requesting for an *EVENT* answer the following questions:

1. Name of event: Staff Retreat
 2. Date and time of event: _____ Expected Attendance: _____
 3. Is this event open to all of the Student Body? Yes No
 4. Are you charging for the event? Yes No
 5. Is this event a fundraiser? Yes No
 6. Are you requesting *FOOD HOLDING* for this event? Yes No
- If Yes, please answer the following (*typed and on a separate piece of paper*):
- a. List the exact items to be purchased along with expected amount
 - b. How is food an integral part of the cultural development of your event?
7. What advertising will you be using?

B. If requesting an *Authorization of Spending within Group* or from *Surplus*,

please type and answer the following questions on a separate piece of paper:

1. What will this money be used for? (*please attach a complete dollar itemization of all money being requested*)
2. What will it mean to your program if this request is denied?
3. What other funding options have you exhausted, and what were the results?
4. Explain how this request will enhance the cultural and physical development of students at the University of Oregon, and how the request will benefit your members.

**Please make note: According to Senate Rule 11.2, requests less than \$1000 must be submitted at least 3 school days prior to the Senate meeting at which the request will be heard. Requests of or over \$1,000 must be submitted at least 5 school days prior.*

Brandy Ota _____ Director _____ 10/1/09
 Print Name of Group Member Signature of Group Member Title Date

Received by (Senator): _____ 10/1/09 1:52pm
 Name Date Time