

**ISAB Funding Request Academic Year 2025/2026**

Student Organization Name: \_\_\_\_\_

Campus: ☐ FCC ☐ LTC ☐ OCC ☐ WVC

Approximate enrollment for this student organization: \_\_\_\_\_

Organization Category (please choose one):

☐ Academic ☐ Arts/Cultural Awareness ☐ Club Sports ☐ Faith-based ☒ Other

**Description of the Item/Activity/Event for which funding is requested:**

What is the name of the item/activity/event: \_\_\_\_\_

What is the date of the activity or event (if applicable): \_\_\_\_\_

Narrative description of the item/activity/event: \_\_\_\_\_

\_\_\_\_\_

How many students who will be invited to participate in or benefit from this item/activity/event?

\_\_\_\_\_

Is this item/activity/event restricted to a specific population of IECC students? ☐ YES ☐ NO

If so, explain:

\_\_\_\_\_

What are the institutional learning priorities that will be accomplished through this Item/Activity/Event: \_\_\_\_\_

\_\_\_\_\_

Have you received funding from ISAB in the past? ☐ YES ☐ NO

If yes, then please answer the following questions:

Describe the student activities, campus events, and/or items that were previously funded:

\_\_\_\_\_

Describe the outcomes from these student activities, campus events, and/or items (attendance/participation, marketing, other outcomes) \_\_\_\_\_

\_\_\_\_\_

**Provide the following information about the available Student Organization funding:**

Current Balance of Student Organization Account: \_\_\_\_\_

Budget/ Cost for the Item/Activity/Event for which funding is requested: \_\_\_\_\_

Anticipated Revenue from fundraising for this Item/Activity/Event: \_\_\_\_\_

Describe anticipating fundraising activities, if any: \_\_\_\_\_

\_\_\_\_\_

Amount of Funding Requested to be approved by ISAB: \_\_\_\_\_

Promotional material for any student activities, campus events, and/or items funded should include the following language: "Funded in part by the IECC Student Advisory Board."

Pictures from funded student activities, campus events, and/or items should be sent to the Dean of Students to be used for annual reporting of funding requests recommended by ISAB and promotional material for ISAB.

Documentation that the funds were expended for the purpose(s) requested should be sent to the Dean of Students within 10 business days of the student activities, campus events, and/or receipt of items. Documentation includes but is not limited to: receipts and proofs of purchase.

**Please provide supporting documentation with this Funding Request form.**

Any questions about how to complete this form should be directed to the IECC Dean of Students.

Advisor Name: \_\_\_\_\_

Advisor Email and Phone#: \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_