

The Student Association
 SUNY New Paltz, SUB 428
 New Paltz, NY 12561
 (845) 257-3070

For Office Use Only Date Received _____ Intitals _____
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PROGRAM REQUEST

Please Type or Print Clearly

*If any questions are not answered this form will be returned. All funded requests must be submitted at least 21 days in advance.
 All non-funded requests must be submitted 14 days in advance.*

*All program requests must fulfill the criteria of efficiency and effectiveness in order to receive approval from
 the Student Association Programming board (SAPB).*

Student Organizations requesting over \$2,000 for a program must submit a minimum of three co-involved organizations.

All events must be registered with the Office of Student Activities and Union Services.

If you need assistance with filling out this form, please go to the SA Business Office, SUB 428.

All organizations requesting over \$5,000 from General Programming must present to the Budget and Finance Committee.

Name of Organization: _____	<input type="checkbox"/> Line Item	<input type="checkbox"/> General Programming
Account number: (if Line Item) _____	Check one:	
	<input type="checkbox"/> Non-funded	<input type="checkbox"/> Funded
Date Submitted: _____	Signator on file: _____	
Title of Event: _____		
Please attach a typed description and purpose to this request.		
Projected Attendance: _____	Total Admissions Fee: _____	
Day and Date of Program: _____	Beginning Time: _____	Ending Time: _____
Location / Destination: _____		

Contact Person: _____	Phone and Address: _____	
List of co-sponsorship: _____		

DETAILED ITEMIZED EXPENDITURES: (Must submit at least 2 written price quotes - with competitive pricing)

	Price Quote Requested	(Total Amount) Approved		
Facilities / Security			A	Total Amount Requested
Food			B	Projected Revenue
Speaker / Entertainment				
Accommodations				
Transportation			C	A - B =
Decorations				
SA Graphics (No P.O. Required)				
Audio / Visual			D	Total Amount Approved
Other _____				

Admission / Registration Fee (if any) - ALL MONIES COLLECTED **MUST** BE DEPOSITED IN THE SA BUSINESS OFFICE.
FAILURE TO DO SO COULD RESULT IN SUSPENSION FROM THE COUNCIL.

Will admission be charged? Yes No

Student Rate _____ x # of people _____ = _____

General Rate _____ x # of people _____ = _____

Other Rate _____ x # of people _____ = _____

Total Revenue = \$ _____

Facilities / Security - ARRANGEMENTS MUST BE MADE THROUGH THE OFFICE OF STUDENT ACTIVITIES AND UNION SERVICES, SUB 209

1. What facility will be used? _____

YOU MUST ATTACH A FACILITY CONTRACT CONFIRMING RESERVATION OF SPACE.

2. If off-campus, What facility will be used? _____

PLEASE SUBMIT SECURITY PLAN, AND REQUISITION FORM OR CONTRACT, IF NEEDED.

Food - MUST CONFIRM YOUR EVENT WITH A PURCHASE ORDER 1 WEEK IN ADVANCE IF USING CAMPUS CATERING SERVICES.

YOU MUST CONSULT WITH CAMPUS CATERING, EVEN IF NOT USING CAMPUS CATERING.

1. Attach a Requisition Form for Campus Catering, or alternate food vendor.

2. How many students will be fed? _____

Speaker / Entertainer - ONLY THE V.P. FOR FINANCE CAN SIGN A CONTRACT WITH AN OUTSIDE VENDOR.

1. Name of speaker/entertainer/or group? _____

2. What type of entertainment will be provided? _____

YOU MUST ATTACH A BIO FOR THE SPEAKER/ENTERTAINER. YOU MUST ATTACH A DESCRIPTION OF ENTERTAINMENT.

YOU MUST ATTACH A SERVICE CONTRACT / REQUISITION FORM. IF THERE IS A RIDER TO THE CONTRACT IT MUST BE ATTACHED.

Accommodations - PLEASE PROVIDE COMPETITIVE PRICES. PLEASE REFER TO THE VENDOR LISTING IN SUB 428.

1. Where will they be staying? _____

2. How many people will be accommodated? _____

3. How many days will they be accommodated? _____

4. What type of room will be provided: Single Double Quad

5. How much will it cost? _____

6. Do they(hotel) accept purchase orders? Yes No

IF YES, YOU MUST ATTACH A REQUISITION FORM.

IF NO, WHAT WILL METHOD OF PAYMENT BE? _____

Transportation - PLEASE PROVIDE COMPETITIVE PRICES. PLEASE REFER TO THE VENDOR LISTING IN SUB 428.

1. How many people will be transported? _____

2. What type of transportation will be provided? _____

IF USING A RENTAL CAR/S, YOU MUST ATTACH A RENTAL CAR FORM.

3. If using a transportation company, please provide name of company? _____

4. Do they(transportation company) accept purchase orders? Yes No

IF YES, YOU MUST ATTACH A REQUISITION FORM.

IF NO, WHAT WILL METHOD OF PAYMENT BE? _____

Audio/Visual - PLEASE PROVIDE COMPETITIVE PRICES. PLEASE REFER TO THE VENDOR LISTING IN SUB 428.

YOU MUST MAKE PROVISIONS WITH SAUS.

1. What services will you be using? Explain.

Decorations - MAXIMUM OF \$600.00 PER PROGRAM REQUEST. ALL DECORATIONS MUST BE DELIVERED TO SUB 428.

YOUR ORGANIZATION MUST COMPARE COST EFFICIENCY WITH DIFFERENT DECORATION COMPANIES - ARE YOU GETTING THE BEST DECORATIONS FOR THE MOST ECONOMICAL PRICE. PLEASE ATTACH COMPETITIVE PRICES.

1. Where will the decorations be purchased? _____

2. What type of decorations will be needed? _____

3. Do they accept purchase orders? Yes No

IF YES, YOU MUST ATTACH AN ITEMIZED REQUISITION FORM.

IF NO, WHAT WILL METHOD OF PAYMENT BE? _____

Publicity - FLYERS MUST BE MADE AND POSTED FOR EVERY EVENT SPONSORED BY THE STUDENT ASSOCIATION. SA RECOGNIZED ORGANIZATIONS ARE REQUIRED TO STATE IN THEIR FLYERS, SPONSORED BY THE STUDENT ASSOCIATION OR ACTIVITY FEE WHETHER THE PROGRAM IS FUNDED OR NOT. NO ADVERTISING MAY BE POSTED BEFORE SAPB AND THE VP FOR FINANCE HAVE APPROVED THE PROGRAM. SA WILL NOT BE HELD ACCOUNTABLE FOR ANY FALSELY SPONSORED ADVERTISEMENTS.

*** IF YOU NEED ASSISTANCE, PLEASE CHECK WITH SA PUBLIC RELATIONS SPECIALIST IN SUB 424**

1. What type of publicity will be used? Check all that apply: Flyers Posters Radio TV Oracle Fahari/Libertad

Other _____

2. Will flyer be made at SA Graphics? Yes No

IF NO, WHO WILL BE RESPONSIBLE FOR DESIGNING THE FLYER? NAME _____

CONTACT NUMBER & EMAIL _____

3. Will publicity be used off campus? If so, what type? _____

*** IF YOU NEED ASSISTANCE, PLEASE CHECK WITH SA PUBLIC RELATIONS SPECIALIST IN SUB 424**

FOR SAPB USE ONLY

- Approved
- Approved w/ stipulations below
- Disapproved because
- Resubmit because

SAPB Chair _____

FOR SA VP FOR FINANCE USE ONLY

- Approved
- Approved w/ stipulations below
- Disapproved because
- Resubmit BFC because

SA VP For Finance _____