

# CO-CURRICULAR PROGRAM REQUEST

Requests must be received by October 1<sup>st</sup> of the fall semester and March 1<sup>st</sup> of the spring semester.

Date of Request:		Date of Activity:	
Faculty Member:		Phone:	Course:
Length of Class:		Number of Students:	
Type of Program Requested: <input type="checkbox"/> On Campus Speaker <input type="checkbox"/> Off Campus Speaker <input type="checkbox"/> Overnight/Weekend Field Trip <input type="checkbox"/> Off Campus Field Trip <input type="checkbox"/> Other (please describe):			
Describe the co-curricular experience you desire (provide as much detail as possible i.e. topic, length of program, activities etc. Use additional sheets if necessary).    			
Will you need transportation? <input type="checkbox"/> Yes <input type="checkbox"/> No  Bus: <input type="text"/> Van: <input type="text"/> Other: <input type="text"/> (please place the number of the vehicles you will need above)			
Budget: Speaker Fee:            \$ <input type="text"/>  Transportation:        \$ <input type="text"/>  Admission:              \$ <input type="text"/> x <input type="text"/> students = \$ <input type="text"/>  Lodging:                 \$ <input type="text"/> x <input type="text"/> nights = \$ <input type="text"/>  Total:                     \$ <input type="text"/>			
Requested funds from Student Success: \$ <input type="text"/> (\$200.00 max per semester)			
Due to costs, some activities may require students to pay a commitment fee which may be returned. Funds are limited. Some requests may not be met.			

**Return to: Carrie Scherer, Coordinator of Student Activities**  
**130 Johnston Hall 217-4184 scherecl@muohio.edu**

For office use only:

Approved:             Amount:             Account: