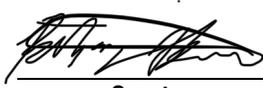# SO SEED MONEY REQUEST GUIDELINES

- SO Seed Money Request (attached) must include the following:
  - Name of Student Organization
  - SO Account Number
  - SO Purpose
  - List of planned events/activities
    - Must list the type of activity, date(s), time(s), and location(s).
  - Contact information for the SO's:
    - Name
    - Position/Title
    - E-mail (must be a GoTritons email address)
    - Phone number
  - Signature from an officer of the requesting Student Organization(s) and the date of submission
- Other required documents to attach to this request:
  - Approved SO Application for Recognition Packet
  - Latest Account Summary Report showing establishment of the SO account with the Business Office

NEWLY-CHARTERED STUDENT ORGANIZATIONS SHALL RECEIVE TWO-HUNDRED DOLLARS ($200.00) AS SEED MONEY FROM THE STUDENT GOVERNMENT ASSOCIATION, TO ASSIST IN STARTING UP THE STUDENT ORGANIZATION AND FUNDRAISING FOR FUTURE EVENTS/ACTIVITIES.

- Upon the recommendation of the SGA Finance Committee through a simple-majority vote, the request shall be approved by the SGA Council at the next possible Regular Session or Special Session. A budget appropriation for the requested amount shall be approved through a bill, to be authored and introduced by a senator and shall require the vote of 2/3rds of the SGA Council. We highly-encourage SOs to utilize their representation in SGA sessions to present their funding request proposal to the SGA Council.
- If your request is approved, the SO shall be notified (via the contact information provided in the application) at the soonest possible time after the bill's passage at an SGA regular/special session.
- A memorandum to transfer funds from SGA to the requesting SO shall be prepared and submitted to the Student Life Office for concurrence with the SLO Coordinator and the Dean of EMSS, before being transmitted to the Business Office for processing.

Approved by: *Sixty-First Student Government Association Finance Committee*

Treasurer	**President**	**Vice President**	**Senator**
Austin Gaizmer Fortuno	Kyona Rivera	Christian Gyles Ramos	Bethany Betito
Chairperson	Co-Chairperson	Member	Member
Senator	**Senator**	**Senator**	**Attested by:**
Jacquelyn Cabusi	Thuy Nguyen	Hanna Ocampo	Dr. James Ji, Advisor
Member	Member	Member	

UNIVERSITY OF GUAM

UNIBETSEDÅT GUAHAN

61ST STUDENT GOVERNMENT ASSOCIATION

Enrollment Management and Student Success

SO SEED MONEY REQUEST – APPLICATION FORM

DIRECTIONS: Fill-up this application form using a **black** or **blue** ink pen or type and submit to the Student Government Association (SGA) Office at the Student Center OR via email at **uog.sga@triton.uog.edu**.

Student Organization Name:		**Account Number:** ***Please attach latest account summary report***
Student Organization Purpose:		

----- FOR SGA OFFICE USE ONLY -----	
FOR TREASURER:	**FOR SECRETARY:**
Received on: _____	**Received on:** _____
Treasurer: ☐ Approved ☐ Disapproved	**Bill Assignment:** _____ --- _____
Finance Committee: ☐ Approved ☐ Disapproved	**Bill Author:** _____
Committee Vote: _____ / _____ / _____ *(Yays/Nays/Abstentions)*	**Session Introduced:** _____
	Council Vote: _____ / _____ / _____ *(Yays/Nays/Abstentions)*
FUNDING AMOUNT APPROVED:	**$ 200.00**

Student Life Office Clearance
(Signature – Mr. Evander DeGuzman)

Business Office Clearance
(Signature – Mrs. Rosalia Abonales)

Planned Events/Activities: *List the type of activity, date(s), time(s), and location(s).*	**Type of Activity:** _____ **Date(s):** _____ **Time(s):** _____ **Location(s):** _____ **Type of Activity:** _____ **Date(s):** _____ **Time(s):** _____ **Location(s):** _____

T: 671.735.2222   E: uog.sga@triton.uog.edu   W: www.uog.edu/student-services/student-government/
Mailing Address: 303 University Drive   UOG Station   Mangilao, Guam 96923

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Planned Events/Activities: *List the type of activity, date(s), time(s), and location(s).*	**Type of Activity:** _____
	Date(s): _____
	Time(s): _____
	Location(s): _____
	Type of Activity: _____
	Date(s): _____
	Time(s): _____
	Location(s): _____
	Type of Activity: _____
	Date(s): _____
	Time(s): _____
	Location(s): _____
	Type of Activity: _____
	Date(s): _____
	Time(s): _____
	Location(s): _____

SO Contact Information:

Name: _____

Position: _____

Email: _____

Phone: _____

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD, AND AGREE TO THE FOLLOWING STATEMENTS. (1) All funds received from the SGA to support the SO shall be expended, in accordance with what is stated in this seed money request. (2) Failure to expend funds as declared above is a violation of this seed money request and shall require the immediate returning of the funds to the SGA. (3) The SO takes full-responsibility for any misuse of funds granted by the SGA, and the SO alone shall be held liable for any misuse of such funds.

_____
Print Name and Sign:
(Must be an officer of the Student Organization)

_____
Date submitted:

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