BOSA FUNDING REQUEST FORM

Student Club Name: _____________________________________________________________

Club Advisor’s Name: __________________________________________________________ 

Title of Activity: __________________________ Advisor’s Phone Number: ______________

Funding Amount Being Requested: _____________ Date Funds Needed: _________________

Coordinator for this Activity: __________________ Coordinator’s Phone Number: ______

Location of this Activity: _________________________________________________________

Short Description of the Activity:

How will KapCC students benefit from this activity?

Do you require campus facilities? _____YES _____NO

If so, have your organization’s advisor contact Janice Yamada at 734-9531.

Have you sought other clubs’ participation? _____YES _____NO

Please specify how your club has assisted the Office of Student Activities (OSA) last semester or this semester.

Have you received previous funding from the Board of Student Activities (BOSA) before _____YES _____NO

Have you received and/or is your club planning to apply for funding from outside sources for this activity?

_____YES _____NO

If yes, please attach a list from whom and the amount(s) requested.

INSTRUCTIONS

- Attach to this application, an itemized list for the funding amount being requested including funding for the proposed activity

- Attach a list of last years’ and/or last semester’s services your club has provided to the college community and the general public including dates and nature of such service(s).

- N.B. Past (BOSA) records and club applications will be reviewed in evaluating your current proposal for BOSA Funding.

- Do NOT purchase any goods and/or services before your funding request is actioned by BOSA. If your request is approved, save all cash receipts involved with this BOSA funding request for submission to the OSA Assistant Coordinator for club reimbursement check processing.

- NOTE: THE PAYMENT PROCESS IS 6-8 WEEKS AFTER THE SUBMISSION OF PAPERWORK.

- Please sign and date the bottom of this form as the “Coordinator” for the activity.

Coordinator of Activity _______________ Date _______________ Club Advisor _______________ Date _______________
FUNDING REQUEST STATUS

Student Club Name: ____________________________________________________________
Title of Activity: _____________________________________________ Date of Activity: ____________

Action by Student Activities Board (BOSA)  Approved_____ Denied_______ Date: ____________

Comments: (This section is for comments, remarks, or conditions of approval or denial)

Liability waiver form received before this activity (if applicable)  YES___ NO____ NA____

BOSA Advisor Date  BOSA Chair Date

Processing Timeline to be Followed:
Day 1: Receipt of a properly completed BOSA Grant Proposal at the Office of Student Activities in Iliahi 126.
Day 14-21: Grant proposal place onto BOSA agenda for a formal hearing with a representative of the requesting club present to explain its proposal and answer questions by BOSA.
Day 22-35: Rendering of a BOSA decision and notification of same to the requesting club or organization.

After the completion of the event, the organization must present a post activity review to BOSA at the next BOSA meeting with documentation of the event which includes pictures, facts (attendance), etc...