Funding Award to a Student Organization

For Student Representative:
Event Name & Date: ________________________________________________
Student Representative Name: ____________________________________ Email: __________________________
Organization Name: ____________________________________________
SOMeCA Advisor Name: □ Angela Harris aeharris@ucsc.edu □ Arlan Mendiola amendiol@ucsc.edu
□ Cory Fong comfong@ucsc.edu □ Daisey Miranda dmiranda@ucsc.edu
□ Don Williams dwilliams@ucsc.edu □ Katherine Canales kcanales@ucsc.edu
□ Scott Leiserson sleisers@ucsc.edu □ Susan Watrous swatrous@ucsc.edu
□ Sayo Fujioka sfujioka@ucsc.edu □ Other: _________________________________
College or Unit Recipient: _______________________________________
Amount Requested: ___________________________ Date Submitted: ____________

For Funder:
Amount Approved: _________________________ If restricted use, please specify: ___________________________
Check Here for Payments to Organization (not funding award): □ Check Here for Unused Funds to be Returned: □
Please Explain Payment:
College/Senate: __________________________________________ Date: ___________________________

For Administration Use:

<table>
<thead>
<tr>
<th>Fund</th>
<th>Organization</th>
<th>Account</th>
<th>Program</th>
<th>Activity</th>
<th>Amount</th>
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<td>Debit</td>
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<td>Credit</td>
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CPC/Provost Signature: __________________________ Date Emailed to SOAR: __________________________
College Fiscal Contact: Name: __________________________ Email: __________________________ Phone: __________________________
SOMeCA/College Advisor: __________________________ Date to Fiscal: __________________________