Introduction

The Student Fees/Finance Committee (SFFC) of the Student Senate is responsible for recommending fee distributions for the Student Activity Fees and the Student Center Fees to the Assistant Dean of Students. The Assistant Dean of Students as the designated fee administrator serves as a resource/information source to the Committee. The budget for the next fiscal year is developed by the Committee and recommended to the Assistant Dean of Students. Faculty representatives may be asked to participate in the discussions, but they are not voting members. The Assistant Dean of Students makes the final recommendation to the Associate Vice President for Student Affairs and Dean of Students.

Student Activity Fees facilitate the development and maintenance of extra and co-curricular activities on and off-campus which increase the ability of students to enrich/enhance their educational goals. The development of a “sense of community” is a key ingredient in attempts to create a sense of belonging among the student population. Student Activity Fees help support clubs and organizations, including the Student Senate and the Phoenix.

Any student club or organization, which has been recognized by the Student Life Unit of Governors State University (GSU) is eligible for funding throughout any present fiscal year and for the following fiscal years to come. These groups are referred to as Recognized Organizations, or ROs. To become an RO, an organization must complete and submit a New Club/Organization Packet to the Student Life Unit for approval.

General Fiscal Year Information

The GSU Student Senate and ROs operate in accordance with the University’s fiscal year, from July to June. Any RO may request supplemental funding during the second allocation meeting of the SFFC in February. The Fiscal Year 2015-2016 Budget Request Packet is due by 5pm on Thursday, June 26, 2015. Packets must be completed and returned to Sheree Sanderson, Assistant Dean of Students, A2104. For questions, please contact 708.534.4552 or ssanderson@govst.edu.

1. Club President and Treasurer must present proposed budget request at the budget hearings conducted by the Student Fees/Finance Committee for fiscal year allocations. Budget presentations will be held: July 13 & 14, August 3 & 4 from 9:00 am – 2:00 pm.

2. Budget requests to the SFFC must meet timelines and format provided in order to be considered for funding.

3. Funding requests must document the benefit to be derived for the proposed activity.

4. All requests must designate the individual(s) who will be fiscally responsible for the effective use of all resources provided.

5. Resources will not be provided to fund activities for which students will receive direct academic credit for their participation.

6. All activities must be open and promoted for participation to all students at Governors State University.

7. All requests must contain signatures of the student sponsor(s) as well as the faculty or staff who have agreed to provide guidance to them in their projects.

8. All expenditure requests for approved budgets will require student officer/sponsor signatures as well as staff/faculty advisor approvals and that of the Assistant Dean of Students.
9. Sponsored program budget requests must identify a fiscal agent who will monitor the expenditure of all funds within the approved budget, university guidelines and accepted practices. All fiscal agents will be expected to attend mandatory orientation sessions on appropriate practices.

10. All paper processes for funding must flow through the Student Life Unit of the Student Affairs and Services Unit of the University.

11. **Clubs and organizations are required to sign and submit a Fund Raising Application form for all such activities to the Assistant Dean of Students. No clubs funds may be donated or earmarked for an external organization. Donations to an external organization must be funded by club fundraising and stipulated at the time of requesting the fundraiser.**

12. The Committee may recommend an amount to be used for general operations, such as small quantity printing, duplication. Budget needs for printing and duplication of 20 or more for activity promotion must be built into your budget request and submitted to the University Print Shop for appropriate billing as a part of your activities.

13. The budget allocations each year will be based on the funding requests received and the fee income projected by the University Comptroller. The Committee may recommend holding up to 15% of the budget for allocation by January 1 of each calendar year for proposals that were not received during the normal spring budget cycle and for clubs requesting additional funds.

14. It is the intent of these guidelines that all applicable University, Board of Trustees policies/procedures and local/state/federal laws be followed. This document is superseded by state/federal law or applicable University guidelines.

15. Dollars for events at which food is served **must** be justified. **Food is not expected to be provided at each meeting.**

16. A club member(s) must attend at least one (1) Student Senate Meeting per month.

17. Conduct at least one (1) service project as an organization per fiscal year.

18. Conduct at least one (1) fundraiser as an organization per fiscal year.

18. Submit their Club/Organization Registration Form to the Assistant Dean of Students by Thursday, June 26, 2015.

19. Any fee funds used to support travel must follow these guidelines.

   a. Currently enrolled students may apply through Student Travel/Conference account.

   b. Faculty travel support does not count toward student travel limitations for any conference.

   c. The maximum number of students who may travel to any individual conference will be four (4) for out and in state.

   d. Student organizations may fund in-and-out-of-state travel for students from their student activity fee funds.
### BUDGET OVERVIEW I: INCOME

**Directions:** Please detail funds available for FY 2016, including reserves you will have this year and/or revenues you anticipate from this year.

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A. FY2015 Projected Carry Over</strong> (monies not expended as of June 30, 2015)</td>
<td>$__________________</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
</tr>
<tr>
<td><strong>B. Dues (if any)</strong></td>
<td>$__________________</td>
</tr>
<tr>
<td># of members ______ x amount $______</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
</tr>
<tr>
<td><strong>C. Fundraisers</strong> (please list by name and income realized/expected)</td>
<td></td>
</tr>
<tr>
<td>1. __________________________________________________________________</td>
<td>$________</td>
</tr>
<tr>
<td>2. __________________________________________________________________</td>
<td>$________</td>
</tr>
<tr>
<td>3. __________________________________________________________________</td>
<td>$________</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$________</td>
</tr>
<tr>
<td><strong>D. Other</strong> (grants, awards, sponsorships, etc; please list by name and income realized/expected)</td>
<td></td>
</tr>
<tr>
<td>1. __________________________________________________________________</td>
<td>$________</td>
</tr>
<tr>
<td>2. __________________________________________________________________</td>
<td>$________</td>
</tr>
<tr>
<td>3. __________________________________________________________________</td>
<td>$________</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$________</td>
</tr>
</tbody>
</table>

FY 2015 Available Income Grand Total: $______________
BUDGET OVERVIEW II: EXPENDITURES – This is your operating budget based on the resources you have, anticipate, or request.

**Directions:** Please provide a detailed budget operating request for the Fiscal Year 2016 starting July 1, 2015 through June 30, 2016.

**E. Contractual Services**

1. Honorariums – for guest speakers, lecturers, etc. $_________
2. Food Service – catering for special events or meetings $_________
3. Postage – for newsletters, invitations, etc. $_________
4. Printing – posters, flyers, invitations, etc. $_________
5. Other (specify in detail) - This category also includes association or national chapter dues and equipment repair/service contract, etc.
   
   a. _______________________________ $_________
   b. _______________________________ $_________
   c. _______________________________ $_________

$_________
Contractual Services Total

**F. Commodities (consumables)**

1. General supplies – letterhead, envelopes, construction paper, etc. $_________
2. Other (specify in detail)
   
   a. _______________________________ $_________
   b. _______________________________ $_________
   c. _______________________________ $_________

$_________
Commodities Total
G. Travel – attach additional information regarding specific conferences; i.e. National Conference of Black Social Workers, Physical Therapy Association Annual Conference, etc.

1. Transportation $__________
2. Lodging $__________
3. Meals $__________
4. Registration fee $__________
5. Ground transportation $__________

$__________
Travel Total

H. Equipment – items over $100.00 which are reusable

   a. ____________________________ $__________
   b. ____________________________ $__________
   c. ____________________________ $__________

$__________
Equipment Total

I. Other - Please specify in detail and attach written documentation with justification.

   a. ____________________________ $__________
   b. ____________________________ $__________
   c. ____________________________ $__________

$__________
Other Total

FY 2016 Grant Total Projected Budget Expenditures: $__________
Club/Organization ______________________________          Account # __________________

FY 2015 Allotment Award $ ___________     FY 2016 Request $ ___________

J. Explain reasons for any increase requested. You may attach additional sheets if necessary.
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

K. Please give a description of the purpose of your organization, the number of active members, and the number and types of programs and activities you can document you had this year. Please include how financial and fund raising decisions are made and the amount of money raised by your group for its activities. You may attach additional sheets if necessary.
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Projected FY 2016 Budget $___________

Minus FY2015 Budget carry over = $___________

FY2016 Allocation Request = $___________

Officer Submitting: ______________________________          Print Name          Signature

Date: ______________________________

Phone Number: Day# ___________________________      Evening # ___________________________

Email: ___________________________________________________________________________________

Advisor: ______________________________          Print Name          Signature

Date: ______________________________
Phone Number:  Day# __________________________ Evening # __________________________

Email: __________________________________________________________________________

[Box:

**SFFC USE ONLY**

**COMMITTEE ACTION**

_____ Application Accepted - Amount Recommended $______________

_____ Memo sent to club/organization advisor and president
    Date of memo: ________________

_____ Application Denied – Reason: __________________________________________________________

_____ Memo sent to club/organization advisor and president
    Date of memo: ________________

SFFC Chair: __________________________

________________________________
Print Name Signature

Date: ____________________________

Assistant Dean of Students

 _____ Recommendation Accepted – Amount Deposited $ ________________ Date: ______________

_____ Application Denied – Reason: __________________________________________________________

________________________________________

Signature Date

Associate Vice President for Student Affairs and Dean of Students Action: __________________________

________________________________________
Signature Date