EAST CENTRAL UNIVERSITY STUDENT SENATE

APPLICATION FOR ORGANIZATIONAL DISBURSEMENT

Organization Name _____

Faculty Sponsor _____ Campus Phone _____

Contact Person _____ Telephone _____

Email _____ Position _____

_____

Amount Requested $_____

Please explain what this money will be used for and how you feel it will benefit the students of ECU:

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

_____ _____

Faculty Sponsor Signature Date