



School of  
Medicine

Student  
Body  
Committee

## Funding Request Form

Submit to Raghu Appasani | SBC Treasurer  
[raghu.appasani@umassmed.edu](mailto:raghu.appasani@umassmed.edu)

### PLEASE READ CAREFULLY BEFORE REQUESTING SBC FUNDS

- Completed request forms must be submitted to SBC Treasurer Raghu Appasani via email at [raghu.appasani@umassmed.edu](mailto:raghu.appasani@umassmed.edu) no later than **1 week prior to your event**.
  - The credit card is the preferred method for all purchases. Reimbursements are a last resort **ONLY** and require prior approval from the Student Body Committee.
  - The Student Affairs credit card is shared for all student groups (SBC and LC) as well as for administrative use of the Office of Student Affairs - so it must be reserved at least **THREE DAYS** in advance with Judy Holewa ([judy.holewa@umassmed.edu](mailto:judy.holewa@umassmed.edu))
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### Credit Card Purchases:

- An approved Funding Request Form must be submitted to Judy Holewa at least 3 days prior to an event. At an agreed upon time the credit card will be released to you and returned at a previously established time.
- An **itemized receipt** showing the date of transaction, no tax was charged AND the event (hand written) on the receipt must be submitted to Judy Holewa **within 24 hours of the event**. If tax is charged on the credit card, it will be the student's responsibility to go back to the vendor and have the tax removed. This must be done within 24 hours. Failure to do so may result in that group becoming ineligible for future SBC funding.



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Submit to Raghu Appasani | SBC Treasurer  
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Student Group Name(s): \_\_\_\_\_

Student Group Advisor(s): \_\_\_\_\_

Event Date: \_\_\_\_\_ Student Event Coordinator: \_\_\_\_\_ E-mail \_\_\_\_\_

Event Description and Goal (2-3 sentences):

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Item	Vendor	Amount

Total Requested \_\_\_\_\_

Total Granted \_\_\_\_\_

How many students are expected to participate in this event? \_\_\_\_\_

Invitees will include (check all that apply):

\_\_\_\_ Student Group Members    \_\_\_\_ SOM Students (not in student group)    \_\_\_\_ GSN Students  
\_\_\_\_ GSBS Students    \_\_\_\_ Faculty    \_\_\_\_ Other (please specify): \_\_\_\_\_

Are you getting external funding for this event? \_\_\_\_ YES \_\_\_\_ NO

If yes, from which organization(s)? \_\_\_\_\_

Name of student responsible for use of SBC Credit Card: \_\_\_\_\_

Please return this completed form to SBC Treasurer Raghu Appasani ([raghu.appasani@umassmed.edu](mailto:raghu.appasani@umassmed.edu)) no later than 1 week prior to your event. Notification of final approval will come from SBC Presidents Philip Feinberg or Camilla Yu.

Approval: \_\_\_\_\_

**Raghu Appasani**  
Treasurer, SBC

**Philip Feinberg**  
Co-President, SBC

**Camilla Yu**  
Co-President, SBC

Date of Approval \_\_\_\_\_