Thank you for sharing an interest in providing quality programs for the Oswego State campus community.

Enclosed in this packet are the guidelines, an application form, a budget outline, and a summary report form. Please pay close attention to the Program Fund Guidelines. These are the criteria whereby all applications for funding will be evaluated. Please note that funding for a prior year does not automatically ensure funding for this year.

The Program Fund Committee is a part of the Auxiliary Services Board of Directors, which is composed of students, faculty, alumni, and staff. This year the committee will allocate approximately $100,000 for campus programs.

Partial funding is frequently awarded because of the limited funds available or because certain items are in violation of the guidelines. Last year, we received 64 applications, totaling $241,594. We allocated $112,152 for these programs.

The completed application and ten copies must be submitted by March 22, 2004 to 507 Culkin Hall.

Questions should be directed to members of the Program Fund Committee or the General Manager of Auxiliary Services.

We look forward to reading your application.
Auxiliary Services Program Fund Guidelines

The following guidelines are offered in the hope of encouraging well-planned proposals for students, faculty, and staff of the College.

The following criteria are used in evaluating proposals:

- Proposals that benefit the College
- Proposals that promote student involvement in the intellectual, social and cultural life of the College
- Proposals that promote specific outcomes that are consistent with specific goals in the College Strategic Plan (Engagement 2000)
- Proposals that support innovative programs
- Proposals, if previously funded, that provide a summary report
- Proposals that are word-processed and present a well-organized and professional appearance

Auxiliary Services will not fund proposals that:

- Provide funding for honorariums or speakers
- Request capital expenditures (equipment purchases, building renovations, etc.)
- Provide for the compensation of college faculty, staff, or students

Further, in the interest of fairness, the Board will not fund proposals that:

- Are submitted by a member or members of the Board of Directors of Auxiliary Services
- Are submitted from someone who is not a member of the College Community
- Are of a duration that goes beyond the fiscal year (June 1 to May 31) for which the funds are approved
- Are contrary to the policies of the State University or the College or Auxiliary Services
- Are incomplete, unsigned by the requestor, or that do not provide specific budget data as requested
Did you remember to:

___ Answer each question in the application?
___ Fill out the budget completely?
___ Sign the form?
___ Turn in a summary report if the program has been funded by Auxiliary Services in the preceding year?
___ Make ten copies of the application?
Program Fund Request

Please answer questions 1-6 and furnish all requested budget information. All requests must be submitted on this form.

Title of Program:

____________________________________________________________________________________

1. Please provide a concise three or four sentence description of the program:

2. What is the general purpose or specific goals of the program?

3. How will this program promote student involvement in the intellectual, social or cultural life of the College?

4. What will the specific outcomes be that are consistent with specific goals in the College Strategic Plan (Engagement 2000)?

5. How will this program benefit, both directly and indirectly, the multicultural or cultural environment of the campus?
6. Other information that would be useful to the Program Fund Committee:
### Estimated Budget

<table>
<thead>
<tr>
<th>Expenditures intended for Auxiliary Services</th>
<th>Amount Requested</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$ __________</td>
</tr>
</tbody>
</table>

#### Projected funds from other sources:
- Source: ____________________________ $ __________
- Source: ____________________________ $ __________

#### Realized funds (already committed) from other sources:
- Source: ____________________________ $ __________
- Source: ____________________________ $ __________

Requested by:

- Name: ___________________________________ Telephone: __________
- Local Address: ________________________________________________
- Email Address: ________________________________________________
- Signature: ____________________________________________________

If submitting on behalf of or affiliated with an organization or department, please indicate:
Auxiliary Services Program Fund
Summary Report

To be completed following the execution of the program.

Title of Program:

_______________________________________________________

Applicant’s Organization or Department

_______________________________________________________

Please respond to the following questions.

Approximate number of people who attended or number of people who utilized the service (if applicable), and the number of people that were projected to use the service:

<table>
<thead>
<tr>
<th></th>
<th>Projected</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Faculty:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff:</td>
<td></td>
<td></td>
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</tbody>
</table>

List the goals of the program and its outcome:

<table>
<thead>
<tr>
<th>Goal</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
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<tr>
<td>2.</td>
<td></td>
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<tr>
<td>3.</td>
<td></td>
</tr>
<tr>
<td>Estimated Budget</td>
<td>Actual Expenditure</td>
</tr>
<tr>
<td>------------------</td>
<td>-------------------</td>
</tr>
<tr>
<td>$ _____</td>
<td>$ _____</td>
</tr>
</tbody>
</table>
| Expenditures intended for Auxiliary Services  
  *(separate food, promotion, printing, etc.)* |
| $ _____ | $ _____ |
| $ _____ | $ _____ |
| $ _____ | $ _____ |
| $ _____ | $ _____ |
| $ _____ | $ _____ |
| Realized funds from other sources:  
  Source: __________________________  
  Amount | $ ______ |
| Source: __________________________  
  $ ______ |
| Source: __________________________  
  $ ______ |
| Source: __________________________  
  $ ______ |