

REQUEST FOR MODIFICATION OF SPAR FUNDS

Must be presented to the funding commission at least 3 weeks before money is to be spent.

DATE: _____

NAME OF CLUB: _____

CLUB OFFICER'S SIGNATURE _____

CLUB ADVISOR'S
SIGNATURE _____

ORIGINAL REQUEST (EVENT): _____

AMOUNT AWARDED: \$ _____

Proposed changes for SPAR funding and reason for doing so:

Benefit to club/campus/community: _____

For Office Use Only:

Modifications Approved Denied

Comments: _____

SPAR Signature: _____ Date: _____

Funding Committee Chairperson: _____ Date: _____

Original: Student Senate
Yellow: SPAR Liaison
Pink: Club Copy