

STUDENT REPRESENTATION FEE (FUND 46)

DASB FINANCE COMMITTEE AGENDA ITEM

This form must be submitted to Student Accounts **NO LATER** than 4:30 PM on the Tuesday (subject to change) before the meeting in which you wish the item to appear. It **MUST** be filled out completely (all pages), or your request may be postponed or denied. Attach additional sheets if necessary.

Clubs should fill out the "ICC/Club Budget Request" form for all requests.

NOTE: The Finance Committee does not meet during the first week of the quarter, dead and finals weeks or breaks.

Please submit the original and one (1) copy of this form and any attachment(s) for a total of two (2) sets.

Name: _____ Signature & Date: _____

Phone: _____ E-mail: _____

Group or department you are representing: _____

You are required to attend the DASB Finance Committee meeting, Monday at 3:30 PM (subject to change), to answer any questions for items 1 and 2 below and possibly item 3 as well if determined by the Chair of Finance.

Request to be on the Finance Committee Agenda For: (check one)

1. **GENERAL ITEM (Includes Budget Transfers):**
 Summary of item: (REQUIRED, use additional sheets if necessary) _____

2. **NEW OR ADDITIONAL FUNDING: Total Requested Amount \$** _____
Complete the next two pages as well when requesting new or additional funding. Attach additional sheets if necessary. Also attach additional details and event/program descriptions. Incomplete applications will not be accepted.

3. **OBJECT CODE/LINE ITEM TRANSFER (Only Page 1 Required; must attend Finance Committee meeting only if contacted):**

Account Name: _____

Account Number: _____

From Object Code:	To Object Code:	Requested Amount \$	DASB Use only Approved Amount \$
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Reason for Transfer: (REQUIRED, use additional sheets if necessary) _____

The Budgeter and Administrator cannot be the same person.

 Budgeter's Name (PRINT) Budgeter's Signature Phone Number E-mail

 Administrator's Name (PRINT) Administrator's Signature Phone Number E-mail

Action Taken
(office use only)

Transfer Approved and Forwarded to Student Accounts on _____ Date Transfer Denied

 DASB Chair of Finance Date DASB Advisor Date

The DASB Finance Code and the DASB Budget Stipulations must be adhered to at all times.
 They are available at <http://www.deanza.edu/dash/budget/>

Student Representation Fee (Fund 46) Funding Criteria

Check off all of the criteria you feel this request meets and attach all supporting documents including conference programs/schedules, event/workshop descriptions, etc.

Also submit a typed statement explaining why you feel this request meets the criteria for Student Representation Fee funds.

Your request will be reviewed by the DASB Finance Committee, DASB Senate, Dean of Student Development, and Vice President of Student Services to determine eligibility for funding from the Student Representation Fee funds.

- Carrying out voter registration, education and mobilization campaigns
- Training students and hiring student interns to organize and advocate for themselves and their communities before state and local decision-making bodies
- Carrying out educational programs for the student body to help students become better informed of important decisions being made at the state and local level affecting their lives as students
- Supporting student advocates to meet with members of the state legislature and other elected officials in Sacramento and/or at the regional or local level
- Supporting student advocates to organize with other students at the local, regional and statewide level at conferences, training sessions and advocacy gatherings
- Increasing the capacity of the student body to organize and mobilize and develop leadership to be more effective advocates for themselves and their communities before state and local decision-making bodies

NEW OR ADDITIONAL STUDENT REPRESENTATION FEE (FUND 46) FUNDING REQUESTS

- 1. Program (Account) Name: _____
- 2. Have you previously received DASB funding for this program?
No Yes DASB Account Number: _____ Year Funded: _____
- 3. If yes, amount previously requested for current account \$ _____
- 4. If yes, total amount previously allocated current account \$ _____
- 5. How long has this program existed? _____
- 6. Number of students directly served or involved in this program: _____

Please ACCURATELY and THOROUGHLY complete numbers 8 – 11 and use additional sheets if necessary.
7. List ALL other accounts and/or sources of income (list ALL Account Numbers, Account Names, Account Balances and Account Purposes/Restrictions) also list ALL Co-Sponsorships for the Program; include anticipated future sources and co-sponsorships. Accounts and amounts will be verified. **Failure to disclose ANY and ALL non-DASB Funding Sources will result in the immediate disqualification of your request and/or the freezing of your DASB Account if already approved.**

- B Budget Accounts: _____
- Trust Accounts: _____
- Fund 15 Accounts: _____
- FHDA Foundation Accounts: _____
- Grant Funded Accounts: _____
- Other District Accounts: _____
- Off-Campus/Off-District Accounts: _____
- On-Campus Co-Sponsorships: _____
- Off-Campus Co-Sponsorships: _____

8. Give a brief description of the program/services to be provided and how they fulfill the mission of the college. How will these funds benefit present and future students? _____

9. How do you use other funding to support your program? _____

10. What would be the impact if DASB did not completely fund this request? _____

11. How have you been meeting or how do you plan to meet the budget stipulation of requiring that all students benefiting from DASB funds allocated to you have paid the \$10 DA Student Body Fee and are DASB Members (DASB Budget Stipulation # 1)? _____

12. Total amount being requested \$ _____
(You must also complete the object code information on the next page)

Signatures that are needed for requesting funds

All financial documents, forms, requests/requisitions require the signature of the budgeter(s) and the administrator responsible for the program of the account. The budgeter and administrator responsible for the program of the account shall sign designating this is an appropriate expenditure of DASB funds and in the best interest of the student body. Administrators are responsible for any expenditures exceeding budget allocations. **The Budgeter and Administrator cannot be the same person.**

The DASB Finance Code and the DASB Budget Stipulations must be adhered to at all times.
They are available at <http://www.deanza.edu/dasb/budget/>

DASB Student Representation Fee (Fund 46) Object Code/Line Item Information

* Fill out only applicable object codes. *

Object Code Name and Number	Description of Expenses (Please itemize all your expenses, BE SPECIFIC)	Requested Amount (round up to the next whole dollar)	DASB Use Only Approved Amount
Student Payroll – 2310 Include hours to be worked x pay rate MUST ALSO COMPLETE BENEFITS – 3200			
Benefits – 3200 (1.52 % for Student Employees) MUST BE COMPLETED WHEN REQUESTING PAYROLL			
Supplies – 4010 (Office supplies or as specified in request or stipulations)			
Banners – 4013 (Reusable banners that will last multiple years)			
Food/Refreshments – 4015 (Must adhere to district Administrative Procedure 6331. http://www.boarddocs.com/ca/fhda/Board.nsf/goto?open &id=AKVUKX7C7F98)			
Printing – 4060 (flyers, posters, programs, forms, etc.)			
Technical & Professional Services – 5214 (Consultants/Guest Speakers/Entertainment) maximum \$1,200 per speaker per event maximum \$1,800 per performance			
Domestic Conference and Travel – 5510			
Grand Total			

No deficit spending will be allowed and all accounts shall be held to line item amounts. Funds allocated to a program must be used for the purpose stated in the original request and stay with that program and cannot be used for or allocated/donated to other programs without DASB Senate approval.

A budgeter’s and an administrator’s signature are required before this form will be considered.

The Budgeter and Administrator cannot be the same person.

Budgeter’s Name (PRINT) Budgeter’s Signature Phone Number E-mail

Budgeter’s Name (PRINT) Budgeter’s Signature Phone Number E-mail

Administrator’s Name (PRINT) Administrators Signature Phone Number E-mail

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