



Activity Fund Group Information Sheet

Please provide the following information:

Campus: _____

Activity Group: _____

Sponsor: _____

Purpose: _____

List the most common sources of funds collected and deposited:

List the most common uses of the funds:

Please attach the following:

1. Sponsor Acknowledgement of Responsibilities Form (signed)
2. List of Elected Officers (if applicable)
3. Current Bylaws (if applicable)
4. Activity Funds Training Module Certificate
5. Business Office Procedures Training Certificate
6. Cash Handling Training Certificate

SAF Student Officer Name (Print)	Student Officer's Signature	Date
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Sponsor Name (Printed)	Sponsor's Signature	Date
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Principal's Name (Printed)	Principal's Signature	Date
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Business Office Use Only:

Approval Status: Yes No

Business Office Signature: _____

Account Code: _____