CCC Collaboration Fund Appeal

This form must be turned into the Club Coordination Council at least 2 weeks before the scheduled event. Send the completed form to the appropriate division's email and contact the Club Coordination Council by email (ccc@nd.edu). A meeting will be scheduled with the club and the CCC division before the appeal will be addressed with the CCC. Please note that the Collaboration Fund is based on a first come first serve basis, so please plan accordingly. Grey highlighted boxes are for CCC use only.

	Sponsor Information:			Date Submitted:		
Club #1 Name:					<u> </u>	
Contact:		E-Mail:	E-Mail: Phone #:			
Contact Signature:				Date:		
Advisor's Signature:				Date:		
CCC Spring Allocation:	\$	Concession Stand Profit:	\$	FOAPAL Balance:	\$	
# of Active Members: Club #2 Name:		Dues Deposited to Date:	\$	Dues per member:	\$	
Contact:		E-Mail:		Phone #	_ ! :	
Contact Signature:	_			Date:		
Advisor's Signature:				Date:		
CCC Spring Allocation:	\$	Concession Stand Profit:	\$	FOAPAL Balance:	\$	
# of Active Members:		Dues Deposited to Date:	\$	Dues per member:	\$	
Club #3 Name:						
Contact:		E-Mail:		Phone #	! :	
Contact Signature:				Date:	<u> </u>	
Advisor's Signature:				Date:		
CCC Spring Allocation:	\$	Concession Stand Profit:	\$	FOAPAL Balance:	\$	
# of Active Members:		Dues Deposited to Date:	\$	Dues per member:	\$	
Club #1 Responsibilities:		Terms of A	greemen	nt:		
Club #2 Responsibilities:						
Club #3 Responsibilities:						
Additional Information:						
		Event Info	ormation	<u>1</u>		
Event:				Event Date	::	
				Times:		
Event History:						
Audience:		Has th	is event eve	r relied on CCC or FMB fundir	ng before?	

CCC Collaboration Fund Appeal

Event Budget:

		LVCIICD	auget.			
Income:			Expenses:			
Club #1 Contribution: \$	Expense:	Amour	nt Expense Type CCC Rec	commendation Division Recommendation		
Club #2 Contribution: \$	Honorarium:	\$	\$	\$		
Club #3 Contribution: \$	Entertainment:	\$	\$	\$		
Department Support: \$	Travel:	\$	\$	\$		
Donations: \$	Lodging:	\$	\$	\$		
Fundraising: \$	Food:	\$	\$	\$		
Members Contribution: \$	Advertising:	\$	\$	\$		
Other: \$	Copy Expenses:	\$	\$	\$		
Other: \$	Supplies:	\$	\$	\$		
Total: \$	Other:	\$	\$	\$		
	Other:	\$	\$	\$		
	Total:	\$	CCC Rec. Total: \$	Division Rec. Total: \$		
	rotun	Ψ		Division recur ocum y		
	Total Income-To	ntal Evnancas	·· ¢			
	rotal medine in	otal Expenses	·· ·			
	Fina	al request	:: \$			
Reason for Appeal:						
пеазоптог Арреат.						
What will happen if the appeal	is not granted?					
what will happen in the appear						
		CCC Office	Ilsa Only			
CCC Members in Interv			O3C Offig			
		-	Time of Interviews			
Date of Interview: Time of Interview:						
CCC Division Signat			_			
Commo						