

BUDGET REQUEST FORM TRAVEL AND LODGING

Funding for any trips or conferences will be provided at the discretion of Med Council and shall be based on the following criteria:

- Available Med Council Funds
- Merits of the club that may include but are not limited to:
 - Frequency and quality of the work and activities of the club
 - Size and diversity of the club's membership
 - Past club budget requests and money usage

Approval for funding will be given as an amount per person and reimbursements will be processed as such. Individuals who spend more than what they were initially approved for are welcome to request additional funding at the following Med Council Meeting, however, additional funding is not guaranteed. **Med Council reserves the right to not reimburse any amount of money that was not used for its intended purpose as detailed in this form and approved at a Med Council meeting.** Clubs are required to:

- Attach a copy of this form to the payment request form along with all relevant receipts in order for reimbursements to be processed
- Email Med Council a brief summary of what participating individuals have learned or how individuals have benefited from attending the trip/conference within seven (7) days of returning from the trip/conference

Failure to fulfill any of the requirements may delay or prevent the processing of payment request forms. For any further questions, contact the Med Council Treasurer at mcbtreasurer@gmail.com

Club/Organization:

Brief Description of Trip (*include Title of conference, destination, etc.*):

Date(s) of conference or trip:

Briefly describe the purpose of attending the event. Be specific. How will attending the event benefit you and/or your organization?

How many people, if any, will be presenting at the conference?

How do you plan on bringing what you have learned back to the SUNY Downstate community?

The trip was advertised to the: (select all that apply)

General student body Club members only E-board members only

How was the trip advertised?

Email Announcement at Meeting Other:

How many people are you requesting funding for?

How many people are committed to attending/travel if funding is not provided?

Itemized Budget:

	Per Person	X Number of persons traveling	Total Cost (for each line)
Registration			
Mode of transportation			
Travel cost			
Meals			
Location of Lodging			
Lodging			
Other			

TOTAL:

Funding Request:

Amount from Med Council:

University Council:

Amount from other resources (i. e. grants, scholarships, etc.):

Please include any additional information that you believe Med Council should be aware of.

Please list the names of the students attending this trip/conference: