

Date received: \_\_\_\_\_ MSD Initials: \_\_\_\_\_ Approved: \_\_\_\_\_ Date: \_\_\_\_\_

# MSD Co-Sponsorship Form

Revised 9/09



The mission statement for the Office of Multicultural Student Development (MSD) clearly speaks to our goal of providing and supporting programming that creates safe spaces for open dialogue and learning about difference. To this end, MSD has established a process for awarding Co-Sponsorship grants to University departments for educational or developmental activities that benefit students. These activities may include cultural festivals, speaker series, film series and other educational events. The following policies have been established to govern this process. Please read carefully the information below.

1. The Multicultural Roundtable will be the approving body for all grants. Approval requires a majority vote after the application is reviewed at a Roundtable meeting.
2. The meeting schedule for the Multicultural Roundtable is posted at [www.multicultural.appstate.edu](http://www.multicultural.appstate.edu).
3. Grants will not be awarded for service projects or activities that are solely for fundraising.
4. Must provide a proposed program agenda with detailed list of anticipated expenses. If this is not available, information from immediate prior year can be substituted for annual events.
5. Grants will only be awarded for food, film rights, speakers/performers/artisans, and advertising supplies.
6. Must provide a detailed advertising plan.
7. Must provide a valid university Fund, Organization, Account and Program number (FOAP) number to transfer funds into.
8. Grant recipients must adhere to all university policies regarding the reservation and use of campus spaces, resources and services.

I have read and agree to abide by these policies: \_\_\_\_\_ Date: \_\_\_\_\_

Requesting Department: \_\_\_\_\_ Phone Number: \_\_\_\_\_

\*Please see reverse for more information\*

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Application Pack checklist

- detailed program agenda
- detailed list of anticipated expenses
- detailed advertising plan

Name: \_\_\_\_\_ Requesting Department: \_\_\_\_\_

Phone Number: \_\_\_\_\_ FOAP Number: \_\_\_\_\_

Event Name: \_\_\_\_\_

Event date (s): \_\_\_\_\_

Location: \_\_\_\_\_

What will take place and who is the intended audience? \_\_\_\_\_

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How does this program promote social justice or multiculturalism? \_\_\_\_\_

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What are the expected outcomes for this event? \_\_\_\_\_

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Everything I/we have provided is true to the best of my knowledge. If I/we fail to follow any of the grant guidelines, I/we forfeit the award and any future awards for one academic year.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_