



UMass | Dartmouth

Campus Services Department • Division of Student Affairs
285 Old Westport Road • Dartmouth, MA 02747 • (508) 999-8000

Request for Donation for a Event from Campus Services

Student Organization Name: _____

Primary Organization Representative(s): _____

Date/Time/Location of Event: _____

Event Name/Event Type: _____

Donation requested: (please type in below)

SERVICE	DESCRIPTION	ESTIMATED COST

Please be advised that this is a request for a donation and final proceeds will be determined by a committee of campus services.

Authorized Student Organization/ Department Representative:

Signed: _____ Date: _____

Campus Services Representative:

Signed: _____ Date: _____

FOR OFFICE USE ONLY

DONATION REVIEWED

EVENT REQUEST FORM COMPLETED

SERVICES DISCUSSED

DONATION DOCUMENTED

DONATION COMMITTED \$ _____ SPEED TYPE# _____