To assure timely deliberations and a ruling on requ the Office of Student Life at least <u>thirty (30) days in</u>	
<ol> <li>Special Reallocation Request Form</li> <li>Itemized budget</li> </ol>	This form is to be used to reallocate <b>approved</b> funds for authorized programs or activity.
3. Supporting documentation	
<ol> <li>Programs must be open to all students of the programs must be open to all students of the programs must support the mission and version and version programs should promote co-curricular less development, volunteer or community ser development should attempt to partner with</li> </ol>	f GPC. vision of the College. earning, personal growth and development, leadership vice.
TYPE OF REQUEST: Campus College-Wi	de Reallocation
ACCOUNT NUMBER:	DATE:
Club/Organization/Department:	Contact Person:

SAF FY 20 Special Request Itemized Budget - Reallocation							
Reallocate Funds From:		Reallocate Funds To:		Funlamation			
Expense Category	Amount	<b>Expense Category</b>	Amount	Explanation			
Total	\$0.00		\$0.00				

Contact Person's Phone #: \_\_\_\_\_ Contact Person's Email: \_\_\_\_\_



Hearing Date: Request Submitted By:							
Representative who will present the							
Amount Reallocated:		_ Amount Approved:  Decision:  Approved  Approved with changes					
SGA/ Special Request Comn	nittee						
☐ Denied							
Vote Results: Yo	ea:	Nay:	Abstain	ed:			
If denied, please state reason:							
Student Votes and Signatures: (Ye	ea, <b>N</b> ay, <b>A</b> l	bstain)					
SGA Student Representative Signa	ture:		Vote:		Date:		
SGA Student Representative Signa	ture:		Vote:		Date:		
SGA Student Representative Signa	ture:		Vote:		Date:		
SGA Student Representative Signa	ture:		Vote:		Date:		
Student Representative Signature:			Vote: _		Date:		
Student Representative Signature:			Vote: _		Date:		
Student Representative Signature:			Vote: _		Date:		
Student Representative Signature:			Vote: _		Date:		
Administrative Signatures:							
SGA President/ Chair:				Date: _			
SGA Treasurer/ Designee:				_ Date:			
Director of Student Life:				Date: _			
Special Request Dean/ Campus De	equest Dean/ Campus Dean:			Date: _			
**Vice-President of Student Affair Comments and Discussion:	's:			_Date: _			

