



# UHCL ALUMNI ASSOCIATION

## PROGRAM DEVELOPMENT ENDOWMENT PROPOSAL TO REQUEST FUNDING

The annual distributed income from this endowment will be used to provide funds, if available, for use in faculty, student, staff and programmatic development other than scholarships. Awards will be made each fall and spring semester. Completed proposals may not exceed **two pages** and must represent events that occur **after current** submission deadline. No attachments accepted except those identified in this document.

Completed proposals are **due June 15 and September 15** (dates subject to change) and should be delivered to the Office of University Advancement (Bayou 2508) or mailed to UHCL MC 318. Award winners will be announced within six weeks of submission deadline. If you have questions please contact the Office of University Advancement at 281-283-2021, [alumni@uhcl.edu](mailto:alumni@uhcl.edu) or stop by Bayou 2508.

University of Houston-Clear Lake | Office of  
University Advancement 2700 Bay Area Boulevard,  
MC 318 | Houston, Texas 77058-1002  
[www.uhcl.edu/alumni](http://www.uhcl.edu/alumni) | [alumni@uhcl.edu](mailto:alumni@uhcl.edu) | 281-283-

2021

## SPECIAL INSTRUCTIONS FOR STUDENT ORGANIZATIONS

1. The event/project/program must occur after the funding deadline.
2. Budget must be submitted on the Student Government Association (SGA) form and attached to this application.
3. You may not request more than half of the total funding through the endowment.
4. Travel requests must follow the guidelines in the Student Organization Handbook, Section 3.10 Travel Funding.
5. Faculty advisor must endorse the application.
6. Oral or written report must be given to the Alumni Partnership Board on how the funds were used and what was accomplished.

## SPECIAL INSTRUCTIONS FOR FACULTY AND STAFF

1. The event/project/program must occur after the funding deadline.
2. Proposals submitted two funding cycles\* in advance will not carry over to the following funding cycle. If funds were not awarded in the current cycle, the proposal will need to be resubmitted with an updated budget summary form for consideration.
3. Proposals may not be resubmitted for consideration in the subsequent funding cycle if funds were awarded in the previous funding cycle.
4. Proposals made more than two funding cycles in advance will not be considered.
5. Proposals must include actual signature from chair or supervisor. Proposals submitted without signature and approval from the appropriate chair or supervisor will not be considered for funding.
6. Proposals must include program endowment budget summary form. (See page 5) Proposals submitted without a complete budget summary form will not be considered for funding.
7. Written report to the Alumni Partnership Board on how funds were used and what was accomplished.

\*A funding cycle is considered the time between the biannual deadlines for a proposal, June 15 and Sept. 15 of each year.

Title of Program: \_\_\_\_\_

Date(s): \_\_\_\_\_ Location: \_\_\_\_\_

Organization and/or Person Requesting Funds: \_\_\_\_\_

**CONTACT INFORMATION OF REQUESTER – REQUIRED**

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

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Signature of Faculty Advisor/Department Chair/Supervisor: \_\_\_\_\_

**DESCRIPTION OF PROGRAM (INCLUDING PROGRAM NEED)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ANTICIPATED IMPACT ON UHCL (FACULTY, STUDENTS AND/OR STAFF)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*If this program has been offered in the past, please include **up to two pages** of material from last year’s event that you feel best represents this activity.*



## USE OF FUNDS

Please present a budget, which outlines total cost of the program, other sources of income, if applicable, and total dollars requested in the space provided below. Please highlight the amount you are requesting from the UHCL Alumni Association.

**Student Organizations:** Please submit this information on the SGA form and attach.

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# BUDGET SUMMARY FORM

(Faculty/ staff use only)

Title of program/conference/event: \_\_\_\_\_

Organization Requesting Funds: \_\_\_\_\_

Date(s): \_\_\_\_\_

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

EXPENSES	
ITEM	COST
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
<b>TOTAL</b>	\$

INCOME / CONTRIBUTIONS / FUNDING SOURCES	
ORGANIZATION	INCOME
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
<b>TOTAL REQUESTED FROM ALUMNI ASSOC.</b>	\$
<b>GRAND TOTAL</b>	\$