

Indiana University East Student Government Association

Evaluation of Student Activity Funds Form

Submit to Campus Life within one week after scheduled activity

Name of Student Organization: _____

Name of event/activity: _____

How many of your organization members attended? _____

How many people attended that are not members of your organization? _____

What changes to this event/activity would you make in the future?

Was all of your requested funding used? _____

Include a short summary describing how you achieved your goals and the benefits that students and the campus received.

Submit copies of receipts with this evaluation form.

Signature & Title & Date