



# Member Originated Activity Project Proposal

Please check one:  New project  Previous project

The purpose of this form is: 1) to help the Guild publicize all Guild activities on its website, and 2) to request potential start-up funds for projects. The Guild office will call to confirm details about the project.

1. Description of project (include product or service and source of product or service).

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2. Timeline: Projected beginning of project: \_\_\_/\_\_\_/\_\_\_ (when planning begins)  
 Projected completion of project: \_\_\_/\_\_\_/\_\_\_ (when office will receive final report/proceeds)  
**Actual date** and time of event (if applicable): Date \_\_\_/\_\_\_/\_\_\_ Time \_\_\_\_\_  
**RSVP deadline:** Date \_\_\_/\_\_\_/\_\_\_ Is space limited?  Yes  No (If yes, how many? \_\_\_\_\_)

3. Projected number of participants: Volunteers \_\_\_\_\_ Number of participants (i.e. buyers/attendees) \_\_\_\_\_  
 Do you need a list of Guild members from the Guild office?  Yes  No  
 Do you need a list of potential invitees from the Guild office?  Yes  No  
 Do you need the Guild office to send invitations?  Yes  No  
 If yes, send via e-mail or mail?  E-mail  Mail  Both

4. This is a  fundraiser  Guild gathering  other (please describe) \_\_\_\_\_

**Budget** (attach separate sheet if desired)  
 Income

Expenses

_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
Total Projected Income	\$ _____	Total Projected Expenses	\$ _____

Will the Guild pay invoices/reimburse?  Yes  No If yes, estimate how much: \$ \_\_\_\_\_

Will you need money in advance (example: deposit on event location)?  Yes  No

(Note: A limited amount of money is available for start-up funds and will be awarded to proposals as funds remain.)

5. How does this project reflect the Guild's mission (To enhance the student experience while exemplifying the University's ideals of scholarship, freedom and faith.)? How does this project support building the endowment, building the membership network, and supporting a positive Guild image?

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Contact Person: \_\_\_\_\_

Address/City/ST/Zip: \_\_\_\_\_

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

Please return completed form to: guild@valpo.edu or Loke Hall – VU Guild, 1100 Campus Drive South, Valparaiso, IN 46383

**For office use only:**

Board approved  Contact made (\_\_\_/\_\_\_/\_\_\_)

Guild office notes: