



Student Organization TRIP PROPOSAL

Contact Information

Student Organization: _____

Date Submitted: _____

Student Coordinator: _____

Phone: _____

Email: _____

Trip Information

Trip Name and Location: _____

Proposed Date: _____

Departure Time: _____

Return Time: _____

Out of state waiver required: _____

Non University Vehicle Waiver required: _____

Advisors /Staff Attending: 1. _____

2. _____

3. _____

Expenditure Breakdown

Please list all costs associated with this trip, including ticket costs, transportation, reimbursements, etc.

Expense

Cost

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total Expenditures:

\$ _____

Charge per student: \$ _____ x # of attendees _____ = Income: \$ _____

Net Cost (Expenditures - Income): \$ _____

Student Organizations may subsidize trips up to 75% of the cost per student and all tickets must be put on sale at the Information Desk. Educational conferences, workshops, and planning/leadership retreats may be subsidized up to 100%.

Organization Signatures

Signature, Student Coordinator

Signature, Organization Advisor

Worcester State University Approvals

Director, Student Involvement

Date