

# RA Funds Request Form

## Residence Hall Association (RHA)

Date: \_\_\_\_\_ Date of the Program: \_\_\_\_\_

Contact Person/Hall: \_\_\_\_\_

Amount being requested (up to \$50): \_\_\_\_\_

How will the program benefit the residents?

---

---

---

---

Description of the program:

---

---

---

---

---

---

---

---

Please give us an itemized list of what you intend on using the RHA money for including monies outside of the RHA money.

---

---

---

---

---

\*\* Due to the RHA office (Goodhue 228) 2 RHA meetings prior to the program