Program Change Amendment		Name of Student Organization			
Use to request a change of program date or an alternative use of ex	xisting grant funds				
CHANGE FROM		CHANGE TO			
Account Number		Account Number (Office Use Only)			
8					
Current Program Title		New Program Title (if applicable)			
Program to be held in: Fall	Spring	Program to be held in: Fall Spring			
Why is this change necessary?					
If requesting a chang	ge of program date or	ly, stop here and proceed to signature section.			
Estimated attendance/participants		Amount originally received from ASI:			
New Program Description (include month of event, if applic	cable)				
	А	B C			
Indicate the revised budget for this program. For each		B C ate the total program cost in Column A. In Column B enter the p	portion of the cost th		
contribute from its own funds. The Column B total me	Expense Category, indic sust equal 30% or more	ate the total program cost in Column A. In Column B enter the p of the Column A total. Otherwise, an "Error" message will ap	pear. The workshee		
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Unive	rsity Student Union	SRWC	Performing Arts Center	The Pyramid	Other
Prepared by					
Print Name		Signature		Date	E-mail Address
Student Life and D	evelopment Advisor				
Drint Nome		Signatura		Data	
Print Name		Signature		Date	