

SAMPLE PROPOSAL

Veterans Club

LAKE HAVASU CITY CAMPUS

NAME OF EVENT: Veterans Day Celebration

SUBMISSION DATE: September 15, 2021

SUBMITTED BY: Michael Adams, Veterans Club President

studentname@students.mohave.edu

PROPOSAL DETAILS

EVENT/ACTIVITY PURPOSE:

Veterans Day is a national holiday honoring all our service men and women. The Veterans Club would like to honor our student veterans by hosting a highly decorated Navy SEAL to speak to the student body about his experiences that led him to where he is now. The mission of the Veterans Club is to build comradery among all students Veterans or not and build awareness of the challenges Veteran students face as they transition to civilian life. We believe the story of this highly decorated Navy Seal will resonate across communities and help build awareness, empathy, and pride in our fellow Veteran students at MCC. To help with attendance, we would like to give two door prizes.

DATE OF EVENT: Wednesday, November 8

TIME OF EVENT: 10am-5pm

LOCATION OF EVENT: Building 200 Room 204

REQUESTED BUDGET: \$473

QUANTITY	ITEMS	COST per ITEM	TOTAL
10	Large pizza from Pizza Hut	\$10	\$100
4	2-Liter Pepsi bottles	\$2	\$8
2	MCC Mugs	\$5	\$5
1	Speaker fee	\$350	\$350
2	Gift bags and tissue paper	\$5	\$10
TOTAL COST			\$473

SAMPLE PROPOSAL CONTINUED

Veterans Club

OTHER REQUESTS:

We request for Dean Ayon to present the guest speaker with a certificate of appreciation on behalf of MCC and the Lake Havasu City Campus.

ASSESSMENT:

Assessment will be conducted will not be conducted

Participants will be asked to sign in and provide an email so that we may follow-up with a survey. The survey will include identification of their learning and development in the principle areas chosen below:

GUIDING PRINCIPLES:

Intellectual Growth

Social Responsibility & Diversity Awareness

Commitment to Civic Engagement and Leadership Inquiry

Independence

PROPOSAL

NAME OF CLUB: _____

CAMPUS: _____

NAME OF EVENT: _____

SUBMISSION DATE: _____

SUBMITTED BY: _____ EMAIL: _____

PROPOSAL DETAILS

EVENT/ACTIVITY PURPOSE:

DATE OF EVENT: _____

TIME OF EVENT: _____

LOCATION OF EVENT: _____

REQUESTED BUDGET: _____

QUANTITY	ITEMS	COST per ITEM	TOTAL
TOTAL COST			

PROPOSAL

OTHER REQUESTS:

ASSESSMENT:

Assessment: will be conducted will not be conducted

If you plan to conduct an assessment, describe your methods of assessment here and choose below the guiding principles for your assessment.

GUIDING PRINCIPLES:

Intellectual Growth

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Independence