Campus Events Funding Evaluation Report

This event/program evaluation must be submitted to 157 Iowa Memorial Union (IMU) within 2 weeks (14 days) of event/program’s completion for funding to be transferred into organization’s account.

*If organization does not complete and submit this evaluation form, the organization’s business office accounts will be frozen until the submission of this form.

Date Submitted: ________________________________

Event/Program Title: ________________________________

Event/Program Date: ________________________________

Contact Person: ________________________________

Projected Attendance: ________________ Actual Final Attendance: ________________

Final Detailed Budget: (Please describe your final expenses.)

How did the funding aid in the success of the event/program

How did you come to learn about this funding opportunity?

Please fill in your organization’ MFK that you would like the award money transferred to:

FUND ORG DEPT SUBDEPT GRANT/PROG INST ACCT ORG ACT DEPT ACT FN COST CTR XXX

XX XXXX XXXXX X XXXXX XXXX XXX XXXXXX XX XXXX

Your funding will not be transferred if these are not submitted!