

# UCSC Student Union Assembly – Program Evaluation Form

Organization or Event		Contact Person	
Title of Event		Email Address	
Date and Time of Event		Amount Funded	

## PURPOSE AND IMPACT OF EVENT

- What was the purpose of the event? Did the event supply opportunities for the educational benefits and personal and social enrichment that derive from participation in extracurricular activities?

## USE OF SUA FUNDING

- How were the requested funds used? Was the actual use of funds different than the intended use? If yes, why? Please attach purchase order form and any appropriate receipts.

## EVALUATION

- What was the expected and actual attendance at the event? What worked and did not work about the event? Did the program or event advance the accessibility of the University to historically underrepresented groups?

## PURPOSE FOR PROGRAM EVALUATION FORM

Section F.2.B.IV states that, "All parties which receive funding from any SUA elective office/commission or RSO and Reserve funds must turn in a SUA Programming Evaluation form within three weeks after the event has passed explaining how SUA money was used and how the event succeeded and failed and where organizers plan on improving future events or programs." The SUA is committed to holding all responsible persons and organizations accountable for their use of SUA funds. Information contained in this form will be used in decisions regarding future funding requests.

## SECTION F CHECKLIST

- Were there mind-altering drugs at this event? No\_\_\_\_\_ Yes\_\_\_\_\_
- All programs which receive funding from any SUA elective office/commission or the General Fund shall publicly recognize SUA as a sponsor of said program/event (e.g. Mic announcements, T-Shirts, Publications, etc.)

The Program Evaluation Form reflects Section F of the SUA Bylaws.

## STIPULATIONS

If your organization or event was funded with stipulations, the SUA Treasurer will attach an addendum to this evaluation form. Please ensure that it is attached with any appropriate documentation.

## RECEIPT DATE AND SIGNATURE

Date Received		Received by:	
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