The AS Student Development Fund (FXXSDV) is an operating account established by the AS Board of Directors for the purpose of funding the professional development of AS employees, while benefiting the Western student body. Money from the SDF may be given as a grant or underwrite.

**Events funded by the AS SDF must meet the following conditions:**

1. All participants must be employees of the AS and not a member of the AS Board of Directors.
2. The program/conference/event must fall within the mission objective of the ASWWU and provide a value to Western students.

**Procedures:**

4. The **AS Personnel Director** makes all decisions regarding allocations from the AS SDF. If a conflict of interest arises, the **AS VP for Business and Operations** makes the final decision.
   1. Submit Student Development Funding Request form at least 2 weeks in advance of when a decision is needed.
   2. **a) All funding requests under $150,000 will require the approval of both the Personnel Director and the AS VP for Business & Operations. AS Business Director. In the event that a decision cannot be made, or a conflict of interest arises the AS President will make the final decision.**
   
   **b) All funding requests over $150,000 will be decided on by the Personnel Committee, with two weeks’ notice.**

3. Employees seeking to use the fund will follow the funding guidelines and procedures set by the AS Personnel Office.

**Amendments:**

Amendments to this policy require a majority vote of the AS Board of Directors.

**Interpretation and Enforcement:**

AS Personnel Director; VP for Business & Operations, AS Board of Directors

Student development fund POL

Approved By: AS Board of Directors

Date Approved:

Organization: Associated Students
ASSOCIATED STUDENTS OF WESTERN WASHINGTON UNIVERSITY
STUDENT DEVELOPMENT FUNDING REQUEST

→ PLEASE COMPLETE THIS APPLICATION IN TYPE OR PRINT
→ SUBMIT YOUR COMPLETED REQUEST TO THE AS PERSONNEL DIRECTOR (VU 505). REQUESTS MUST BE SUBMITTED AT LEAST TWO WEEKS PRIOR TO WHEN A DECISION IS NEEDED.

PERSONAL INFORMATION

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
<th>Date of Application</th>
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<thead>
<tr>
<th>AS Office</th>
<th>Position</th>
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<thead>
<tr>
<th>Supervisor</th>
<th>AS Email</th>
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<table>
<thead>
<tr>
<th>Office Phone Number</th>
<th>Alternative Phone Number</th>
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CONFERENCE/TRAINING INFORMATION

<table>
<thead>
<tr>
<th>Conference/Training Title (please be specific)</th>
<th>Date(s) of Conference/Training</th>
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<thead>
<tr>
<th>Conference/Training Address</th>
<th>Hosting Organization/School</th>
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City                  State       Zip Code

Conferencedra ining Website

Please explain how the AS and Western Washington University will benefit from this conference/training. How will your position within the AS benefit? (Please be thorough.)

______________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________
**EXPENSES** - Please list all expenses.

1. ___________________________________________ $____________

2. ___________________________________________ $____________

3. ___________________________________________ $____________

4. ___________________________________________ $____________

5. ___________________________________________ $____________

$ Total Expenses

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**FUNDING** - Please list all sources of funding.

- Office/Department's Contributions $____________
- Co-sponsorship from other groups $____________
  Co-sponsor __________________________ Phone Number __________________________
- Other funding sources $____________
- Request from Student Development Fund $____________

$ Total Funding

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**FOR OFFICIAL USE ONLY:**

If request is under $400, it must be approved by both the AS Personnel Director & AS Business Director.

Approved: Yes No $____________
  Amount __________________________ Date Approved __________________________
  Approved by: (AS Personnel Director)

Approved: Yes No $____________
  Amount __________________________ Date Approved __________________________
  Approved by: (AS Business Director)

AS VP for Business & Operations will make final decisions on ties and/or conflicts of interests.

Approved: Yes No $____________
  Amount __________________________ Date Approved __________________________
  Approved by: (AS VP for Business & Operations)

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If request is over $400, it must be approved by Personnel Committee.

Approved: Yes No $____________
  Amount __________________________ Date Approved __________________________
  Signed by: AS Personnel Committee Chair

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