

Please complete the form and return to the front desk of the Student Government Association office (SU 214) within 30 days of your event.

Failure to do so could affect future funding.



## Operations Review Committee (ORC) Post Event Program Evaluation Form

Student Government Association  
University of Central Florida

This form will be reviewed by the Operations Review Committee. If there are discrepancies and/or deviations in information reported here compared to that reported to the allocating entity (A&SF Budget, Senate Bill, FAO, CRT) ORC will investigate the issue. ORC may take steps including, but not limited to, fiscal probation to clarify the issue in the event that such a problem arises. Please try to ensure that all information (expenses, allocation number, etc.) is completed carefully and consistently.

All parts of this form are mandatory for its validity. Omitting any section of the form will render it incomplete.

Organization/Individual Name:	
Student Representative's Name:	
Student Representative's Phone:	(     )
Student Representative's E-Mail:	
Organization's SGA Senator's Name:	
Conference / Program Name:	
Funding Method:	FAO Allocation     Senate Bill     A&SF Budget     Other: _____
Bill or Allocation #	

Expense Type	Amount
Total Expenses (Including costs not aided by A&SF funds)	\$
Amount Allocated for trip	\$
Additional money used	\$
Money left over from allocation	\$

<p><b>Additional Information/Notes:</b> Please provide explanation for any difference in information that has arisen since funds were allocated.</p>   
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### Program Effectiveness Evaluation Survey

- What was the expected number of attendees? \_\_\_\_\_ What was the total number of attendees? \_\_\_\_\_
  - How many attendees were current organization members or alumni? \_\_\_\_\_
- How was the event publicized? \_\_\_\_\_
- List sources of funding other than yourself/organization and SGA: \_\_\_\_\_  
\_\_\_\_\_

**All agencies, organizations, and individuals receiving A&SF funding shall be subject to audit by the State of Florida, UCF's Office of Internal Auditing, the Student Government Finance Office, the Operations Review Committee, or the Student Government Comptroller; per SGA Statutes Title VIII Chapter 800.10**

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- How much funding, if any, was received through fundraising activities? \_\_\_\_\_
- Were donations collected at this event? Yes / No. If Yes, how much was collected: \_\_\_\_\_
- Please provide a brief description of the event and the group's involvement there: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OPTIONAL SURVEY**

- Do you have any suggested improvements for the funding process or SGA? \_\_\_\_\_  
\_\_\_\_\_
- Was assistance accessible to you throughout the funding process? If no, please elaborate  
\_\_\_\_\_  
\_\_\_\_\_
- Do you have any questions about Student Government Association that you would like answered? If so, please state:  
\_\_\_\_\_  
\_\_\_\_\_

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