

**Return to Tara Kermiet,
Director of Student
Activities & Service**

Student Organization Assistance Program (SOAP) Application

Organization's Full Name: _____

Type of Organization (circle only one): Athletic • Greek • Honorary • Interest/Independent • Religious Life • Service

Contact Email: _____ Contact Phone: _____

Description of activity (include date):

How does this activity support LaGrange College's mission statement of "Challenging the Mind & Inspiring the Soul?" How does the activity promote campus life?

Will the activity occur on campus? (circle one) YES NO
If no, where? _____

List of supplies:

Item	Purpose	Anticipated Cost

Anticipated total cost: _____

This form must be filled in completely and submitted no later than one academic month before the funds are needed. Applications must be submitted to Tara Kermiet, Director of Student Activities and Service in Turner 217.

Office Use Only:

Date submitted: _____ SOAP Committee Approval: YES NO

SGA Treasurer Signature _____ Date _____ Amount Granted _____

Notes: _____

