

Student Organization Assistance Program (SOAP) Funds Request Form

Please copy and paste the below questions into an email to Win Forrester-Barlow and fill it out
(efbarlow@lagrange.edu)

And Bcc Mr. Hill (vhill@lagrange.edu)

Name of Organization:

Type of Organization (Highlight only one): Athletic – Greek – Honorary – Independent –
Spiritual Life – Service

Contact Name:

Name of Event/Type of event:

Provide a brief description of the event including date and time of event:

Purpose/objective of the event:

Where will the event be? And has the space been REQUESTED?

Please attach the excel file below **to the email** with these four columns labeled: Items, Purpose, Vendor (name and link), and Anticipated Costs. Please also include the total anticipated costs for the activity/event.

- [Excel Template](#)