ASNVC Agenda Request Form

Napa Valley College: Student Life/ASNVC Office Rm. 1342 (707) 256-7340

Date:	GhiXYbh#Cf[l	Ghi XYbh#Cf[Ub]nUh]cb BUa Y:				
Title of Agenda Re	quest:					
Where you would li	ke the item on the agend	la (circle	one):			
Information	New Bu	ısiness				
Item Description etc.):	(ex: campus event, ASNVC	endorsemen	ţ Financial supp	oort, Da	te, time, Location	
Please attach any add	ditional information LQ	YRLFHV	HVWLPDV	WHV	UHFHLSWV	PLQXW
	SURSRVDO as y rliamentary procedure) :	ou would st	atenine ating (I	t must b	e clearly written, fol	low
Contact:			\$ 6	319&	:	
Additional Contacts	:			8%		
			Oth	ner:		

Budget Breakdown it is scheduled Item

Item	Cost	Group cover ing the cost	_
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Form Updated 06/	