



**VISITING LECTURES COMMITTEE (VLC-RFP)  
REQUEST FOR FUNDING PROPOSAL – SP10'**

- Please mail one signed hardcopy to Diane Kornegay at the OSA/Union by **November 6th**
- Note that this form is NOT the University Theme Committee RFP.
- Read the RFP Guidelines

Name of Organization or Department:

Faculty Advisor's Contact information  
(Name, phone, & e-mail):

Student Organization President's Contact name & number:  
(If applicable or N/A)

Will this be a co-sponsored event? Yes or No

Type of Program: Lecture \_\_\_\_\_ Film \_\_\_\_\_ Workshop \_\_\_\_\_

How will this program benefit the student body?

**Name of Lecturer:**

**Proposed Date of Program:**

**Location:**

**Time**

**ANTICIPATED COST OF PROGRAM**

**ANTICIPATED REVENUE**

Lecture Fee/Honarium \_\_\_\_\_

Allocation from Org. Dept.  
to help cover the cost of  
the program. \_\_\_\_\_

Other anticipated  
expenses - advertising,  
programs, etc.  
(if not included in  
Honorarium) \_\_\_\_\_

Amount of funds secured  
from other sources.  
(Please attach a list.) \_\_\_\_\_

Total Cost of Program \_\_\_\_\_

**Request from VLC** \_\_\_\_\_

**\*WE AGREE TO ABIDE BY ALL OF THE GUIDELINES AS STATED BY THE VISITING LECTURES COMMITTEE.\***

\_\_\_\_\_  
Signature of Faculty Advisor or Dept. Chair

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Organization President (If applicable)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of VLC Chairman

\_\_\_\_\_  
Approved    \_\_\_\_\_  
Disapproved    \_\_\_\_\_  
Date

Please provide additional information on the program and lecturer that will assist us in making a fair decision. Include URL links or materials with completed forms. **Questions? Contact Diane at [dm-kornegay@wiu.edu](mailto:dm-kornegay@wiu.edu). THANK YOU!**

**Return by November 6th to: VLC c/o Diane Kornegay  
OSA/UNION**