

Student Health & Counseling Services Wellness Grant

Application Questions

Application Information

- Name
- Email address
- Phone
- Name of Department/Unit/Student Organization
- What is your role or position within the Department/Unit/Student Organization?

Event/Program Information

- Name of the Event/Program
- Date(s) of the Event/Program
- Location
- Estimated Attendance
- Funding request amount from SHCS (\$)
- Total Event/Program budget (detail all expected expenses)
- Provide a detailed description and purpose of the Event/Program
- Enter estimated attendance numbers of who will benefit from the Event/Program:
 - Students
 - Staff
 - Faculty
 - UCD Community Members
 - Other

Event/Program History

- Has your Department/Unit/Student Organization put on this Event/Program in the past?
- If so, please provide:
 - Date(s)
 - Location
 - Total attendance

Student Learning Outcomes and Impact

- Who is the target audience of the Event/Program?
- What is the need that is being addressed?
- What is the desired outcome?
- What program, activity or service will be provided?
- How does the Event/Program benefit the health and wellbeing of the student body?
- How will you measure the success of the Event/Program?