

## **RISO FUNDING REQUEST CHECKLIST**

Use this checklist to ensure that all of the proper steps have been taken. Please have a RISO representative initial the following checklist items. By initialing the following items, the RISO representative agrees that he or she acknowledges and understands UHHSAs funding policy and funding procedure.

1. \_\_\_\_\_ Register your RISO with Campus Center Office (CC210).  
<http://www.uhh.hawaii.edu/campuscenter/riso/index.php>
  
2. \_\_\_\_\_ Contact a senator to have them advocate for your organization.  
UHHSAs Senator’s Name: \_\_\_\_\_
  
3. \_\_\_\_\_ Contact the RISO Chair to schedule and attend a RISO Committee meeting on Tuesday (subject to change). Come to the meeting with any further questions regarding the application process and the funding policy.
  
4. \_\_\_\_\_ Review & submit application, signed funding policy, total event budget, and an event flyer to the RISO Committee Chair. Applications and all other required materials must be submitted by 2:00pm on Monday in order to come to a RISO Committee meeting on Tuesday. RISO must come to a RISO Committee meeting on Tuesday to proceed with application process.
  
5. \_\_\_\_\_ Compose a Senate Bill with your advocating senator regarding your funding request and make sure that your advocating senator emails the Senate Bill to the President 48 hours prior to the UHHSAs Senate meeting on Friday to be placed on the agenda.
  
6. \_\_\_\_\_ RISOs are required to have a representative at an UHHSAs Senate meeting to present and explain the proposal and answer any questions. Verify with RISO Chair that your RISO representative will be there.
  
7. \_\_\_\_\_ Keep in contact with your advocating senator to complete paperwork. (If your bill is passed, it will become your RISOs responsibility to help your advocating Senator.
  
8. \_\_\_\_\_ Keep in contact with UHHSAs RISO Committee Chair regarding UHHSAs volunteer hours for your RISO.

**This is to certify that the \_\_\_\_\_ (RISO) has completed the above checklist. Furthermore, we agree to provide additional information, if requested, other than that specified on the request form. We agree to have a representative present to answer any inquiries of the UHHSa senate. Upon senate approval, we understand that the University may require a 7-8 week period before our club can expect payments to be made for the requested purchases.**

\_\_\_\_\_  
**Name of Registered Independent Student Organization**

\_\_\_\_\_  
**Signature of RISO Representative**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of RISO Advisor**

\_\_\_\_\_  
**Date**

**If you have any further questions please contact the RISO Chair:**

**Maleka Cook**  
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**Phone: (808) 974-7500**