



UNIVERSITY COLLEGE DUBLIN  
SOCIETIES COUNCIL



**SPECIAL GRANT APPLICATION**  
*(COVER PAGE)*

***To be completed by office staff only:***

Date received: \_\_\_\_\_ Received By: \_\_\_\_\_

Please complete both sections of this form and attach it to your special grant application.  
Incomplete applications will not be accepted.

***Section A: The Society***

Society: \_\_\_\_\_ Date: \_\_\_\_\_

Auditor: \_\_\_\_\_ Senior Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone No.: \_\_\_\_\_ Phone No.: \_\_\_\_\_

***Section B: Basic Event Details***

Title of Event: \_\_\_\_\_

Type of Event: \_\_\_\_\_  
(Inaugural, Trip, Publication etc.)

Date: \_\_\_\_\_

Venue: \_\_\_\_\_

Attendance No.: \_\_\_\_\_

Amount Requested: €

***Please attach this form to your application.***

***All applications should include any additional event details and a full breakdown of the event costs.***