

Morningside College Life Committee Student Activity Sponsorship¹ Application

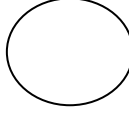
Completed form and supporting documents should be submitted in both print and soft copy to College Office and via email to mc.collegelife@cuhk.edu.hk respectively. **INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.**

Please tick the appropriate box(es).

Part A Basic details

Full name of applicant(s):					
Mobile no.:		Email:			
Programme name:					
Organizer(s):					
Programme date(s):		Start time:		End time:	
Programme location:					
Type of activity	College group activity(ies), → go to Part B		<input type="checkbox"/>	Individual activity, → go to Part C	
			<input type="checkbox"/>		

Part B College group activity(ies)

Student group submitting the proposal:					
Number of members:		Expected attendance:			
Location reserved through the College Office?			<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Is this event free?			<input type="checkbox"/> Yes	<input type="checkbox"/> No ²	
Is this activity open to all Morningside students?			<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Is this activity open to all CUHK students?			<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Is this activity open to non-CUHK students?			<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Will you receive sponsorship from a non-CUHK organization(s)?			<input type="checkbox"/> Yes ²	<input type="checkbox"/> No	
<u>For proposals involving income and/or requesting sponsorship of HK\$5,000 or above,</u> Morningside Student Union's endorsement is required.					
MCSU: <input type="checkbox"/> Endorsed <input type="checkbox"/> Not endorsed			MCSU chop 		
Comments:					
Co-sponsor information (if applicable)					
Co-sponsor group/department:					
Number of members:					
Contact name(s):					
Mobile no.:		Email:			

Part C Individual activity (non-coursework related and non-credit-bearing activities)

Nature of Activity:	<input type="checkbox"/> Competition	<input type="checkbox"/> Conference ³	<input type="checkbox"/> Seminar/talk	
	<input type="checkbox"/> Study/field trip	<input type="checkbox"/> Others (please specify: _____)		
Do you represent CUHK or any organization(s) for the above activity? If yes, please specify: _____.				

¹ All funding is on a reimbursement basis. Reimbursement will not be processed unless valid receipt(s) and a completion report are submitted to the College Office within one (1) month after the event. Valid receipts and record(s) of foreign currency exchange rate(s) on the day of calculation must be submitted with this form for reimbursement.

² Please provide expected ticket income or sponsorship on page 2 (Budget/Income).

³ Applicable to conference(s) in which applicants do not present any academic papers. Applicants who present academic papers in the conference(s) should apply for College Conference Grant.

Part D Description and purpose of activity

I/We have provided a 1-2 page description of activity that includes the following and supporting documents for College's consideration:

1	details and goals of the activity;	<input type="checkbox"/> Yes <input type="checkbox"/> No
2	which College value(s) – Scholarship, Virtue, Service – this activity supports and how the activity supports the value(s);	<input type="checkbox"/> Yes <input type="checkbox"/> No
3	quotation(s) and the foreign currency exchange rate(s) against Hong Kong dollars, if applicable (at least 1 quotation for budget item(s) ≥ HK\$1,000; 2 quotations for budget item(s) ≥ HK\$10,000 and 3 quotations for budget item(s) ≥ HK\$30,000);	<input type="checkbox"/> Yes <input type="checkbox"/> No
4	pamphlet of programme/activity(ies);	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	list of participants for College group activity(ies), if applicable;	<input type="checkbox"/> Yes <input type="checkbox"/> No
6	floor plan of setting of activity(ies), if applicable; and	<input type="checkbox"/> Yes <input type="checkbox"/> No
7	details of all non-CUHK sponsorships.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Part E Estimated budget

Income (not including Morningside College Life funds)

No.	Sponsoring organization(s)/department(s)	Contact E-mail	Confirmed?	Amount (HK\$)
1			<input type="checkbox"/> Yes <input type="checkbox"/> No	
2			<input type="checkbox"/> Yes <input type="checkbox"/> No	
TOTAL INCOME (HK\$):				

Expenses

No.	Item	Cost (HK\$)
1		
2		
3		
4		
5		
6		
7		
8		
TOTAL EXPENSES:		

Expenses to be covered by College Life sponsorship

No.	Item	Cost (HK\$)
1		
2		
3		
4		
5		
6		
7		
8		
TOTAL GRANT REQUESTED (HK\$):		

Part F Declaration

- ☐ I/We confirm that the information I have provided is true and correct to the best of my knowledge. If the above information is found false/incomplete, Morningside College reserves the right to withdraw any concessions granted.

Confirmed by (Name in full) : _____

Date: _____