



**Morningside College Life Committee
Student Activity Sponsorship¹ Application (for sponsorship within HK\$1,500)²⁺³**

Basic Details

Full name of applicant(s) and Student ID			
Organizer(s) (if applicable)			
Mobile		Email	

Activity

Anticipated Number of Participants (please specify if there will be other non-MC participants)	
Planned Date of Event	

Name of Event		
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Budget (Note: sponsorship will only be made available for MC students)	Item	Budget (HK\$)
	Total	

Purpose(s) / Objective(s) and Brief Description of the activity	
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Other Comments (if any)	
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Signature of Applicant / Representative of Organizer	Date
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For Office Use ONLY

<input type="checkbox"/> The application is approved. Approved amount is HK\$_____. <input type="checkbox"/> The application is NOT approved.
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for The Chair, College Life Committee

¹ All funding is on a reimbursement basis. Reimbursement will not be processed unless valid receipt(s) and a completion report along with financial statement 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 Application will be processed within 10 working days.
³ The College retains the right to use all event-related materials for promotional purpose.

Remarks:
 1) Please fill in participant list in page 4 for group activity.
 2) For reimbursement, please provide the following:
 (i) Completion Report and
 (ii) Original receipt(s)/invoice(s) (should be pasted on A4 paper)

**Morningside College Life Committee
 Completion Report (for sponsorship within HK\$1,500)**

Name of Event	
Date of Event	
Number of Participants	
Name and Student ID for reimbursement	
Total Expenditure to be reimbursed (please fill in Financial Statement in the following page)	
Objectives achieved (Yes/No, please provide not more than 100 words on this part)	
Other Comments (if any)	
Please also send 1-2 photo(s) with resolution of 5MB or above.	

Financial Statement

Expenditure

Receipt/Invoice Reference Number*	Items	Budgeted Expenditure (HKD)	Actual Expenditure (HKD)	Remarks (if any)
<i>Total (HKD)</i>		\$	\$	
<i>Total Reimbursement Amount (HKD)</i>			\$	

*Please assign sequential reference number on the right hand corner of each supporting receipt/invoice.

Submitted by		
Contact Information	Email	
	Phone	
Submission Date		

Participant List (for group activity)

	Student Name	Student ID	Non-MC Students*	Money collected
			please ✓ as appropriate	
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Remarks (if any):

* Please be reminded to collect all cost involved of the activity from Non-MC students unless otherwise specified.