**The Chinese University of Hong Kong**

**Office of Student Affairs**

 **Student Activity Fund**

**Application Form 2023-2024 (Term 2)**

※Please complete all items consistently in English.

※Please note that handwritten forms will not be accepted.

**Part 1: Basic Information**

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| --- | --- |
| **Type of Application:**  |  □ Individual  □ Student Society (affiliated with OSA) |
| **Name of Applicant:** |  **(English)** |
| **(Chinese)** |
| **SID: (10 digits)** |  | **Study programme:** |  |
| **Study year:** |  | **College:** |  |
| **Email(CUHK):**  |  | **Contact no.** **(for WhatsApp)** |  |
| **Society Name:** *(same as constitution) (if applicable)* |  **(English)** |
| **(Chinese)** |
| **Position:***(if applicable)* |  |
| **No. of society members:** *(as of the application date):* *(if applicable)* |  |
| **Term of Service** (dd/mm/yy)**:***(if applicable)* | **From To**  |
| **Any regular Sponsorship / Financial Support?**□ Yes (Name of Organization ; Amount HK$ )； □ No |
| **Financial Balance** *(as of the application date)*  | **HK$** | **Membership fee per member**  | **HK$**  |
| **Requested amount of fund:**  | **HK$** |

**Part 2: Uploading Required Documents (Word Documents)**

Please upload below documents **in English** at <https://cloud.itsc.cuhk.edu.hk/webform/view.php?id=13679410>

1. Completed Application Form (File name: name \_application form.docx)
2. Proposal of the project (File name: name \_activity proposal.docx)
3. Budget plan of the project (File name: name \_budget plan.docx)

**Part 3: Proposal of the project**

※If you have more than 1 activity in your project, please mention all activities separately.

※Please submit your detailed Activities Proposal via webform.

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| **Activity 1** |
| **Name of activity:** |  |
| **Aim/mission/objective** |  |
| **Organizer of the activities:***(if applicable)* |  |
| **Summary of the activities:****(Expectation are required to be included)** |  |
| **Period of the activities:** |  |
| **Venue of the activities** |  |
| **Types of target audience** |  |
| **Estimated no. of Participants****(campus and public):** |  |

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| **Activity 2** |
| **Name of activity:** |  |
| **Aim/mission/objective** |  |
| **Organizer of the activities:***(if applicable)* |  |
| **Summary of the activities:****(Expectation are required to be included)** |  |
| **Period of the activities:** |  |
| **Venue of the activities** |  |
| **Types of target audience** |  |
| **Estimated no. of Participants****(campus and public):** |  |

**Part 4: Budget Plan of Student Activities**

※Please submit your detailed budget plan via webform.

※The WHOLE table, including the income section, should be retained. (Please indicate zero if there are no incomes from the activities)

| **Name of activities** | **Items (breakdown)** | **Estimated Income (HK$)** |
| --- | --- | --- |
|  | Estimated Source of Income:(Including any other funding applied, external sponsorship) |  |
| Programme/enrolment fee from participants |  |
| Funding from University/ College/ School/ Department |  |
| External sponsorship |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  | **Total Estimated Income:** |  |

|  |  |  |
| --- | --- | --- |
| **Name of activities** | **Items (breakdown)****(e.g. Printing/ publications)** | **Estimated Expenditure (HK$)** |
|  |  |  |
|  |  |
|  |  |
|  |  |
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|  |  |
|  |  |
|  |  |
|  | **Total Estimated Expenditure:** |  |
|  | **Estimated Total Balance:** |  |
|  | **Requested Amount of Fund from OSA:*(Total******Estimated Expenditure-******Total Estimated Income)***  |  |

※Requested Amount of Fund from OSA is required to be the same as Estimated Total Balance.

 ※No Surplus should be found.

**Part 5:**

**(a) Endorsement from College/ Faculty / Department / Programme Office** *(if applicable)*

※for College/ Faculty/ Department /Programme Society only

|  |
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| I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of staff) endorse the activity plan submitted by the society. Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / Title:\_\_\_\_\_\_\_\_\_\_\_\_)Stamp of College / Faculty/ Department / Programme Office/College: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Part 6: Signature of Applicant**

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Application Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Stamp of the society *(if applicable)*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_