

Student Development Services Student Life and Resources Section

STUDENT NON-LOCAL ACTIVITY FUND

Reference No.	
	(For office use only,

Application Form

(Please type or write clearly in black.)

Notes to applicants:

- 1. Please read the Application Guidelines of Student Non-Local Activity Fund before completing the application form.
- 2. Personal data provided in this form will be used only for processing the application and related administrative matters.
- 3. The completed form with relevant documents should be submitted to Student Development Services (6/F, Bank of China (HK) Complex).
- 4. Applicants must specify the amount of funding obtained from external and/ or other departments.
- 5. Any misrepresentation of facts will lead to disqualification of the subsidy and render applicant liable to disciplinary action by the University. The University reserves the right to demand the subsidy recipients for refund, partially or in full, if they fail to fulfill the obligation(s) as required.

PART I – Personal Particulars

ype of Application:					
Name of Applicant/ Gr					
Name of Society (if app	olicable):		Position (in	f applicable):	
Programme of Study:				ear of Study:	_
Contact No.:		E-mail Address:			
*Please select as approp PART II — Activity De (Please attach separate	etails	r the questions belo	w if necessary.)		
1. Name of Activity:					
2. Organiser:					
2. Date(s)/ Period:					
3. Destination:					
4. Objective(s) of the A	Activity:				

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5. Intended Learning Outcomes (ILOs): (Learning Outcome is something that can be demonstrated or measured, e.g. knowledge or skills.)
6. Itinerary and Learning Activities for achieving the ILOs: (Please specify details of dates, venues, content, etc. and attach any additional information if necessary.)
7. Assessment Measures on ILOs: (Please provide information on how the ILOs will be assessed, such as briefing, survey or training that will be conducted before, during and after the trip.)
8. Follow-up plans or activities for the consolidation of the learning experience:

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9. No. of Target Participants:

(Please attach the name list with Student ID and organisational structure (if any) for the following if available.)

	No. of CityU Students	No. of non-CityU Students (Please specify.)
7.1 Organising Committee		
7.2 Participants		

10. Advisor(s), if any:

(Please attach recommendation letter(s) if available.)

11. Work Schedule:

(Please specify the dates and tasks/ actions.)

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12. Budget:

- 1. Please list out the detailed breakdown of the income and expenditure items; leave blank for those that do not apply and add items that are not on the list below.
- 2. The subsidy shall cover partial costs including transportation, accommodation, boarding, registration fees, project expenses, souvenirs and insurance, incurred by students in the overseas activities.
- 3. All expenses shall first be met by fees received from the participants and other sources of income. The activity will only be subsidsed when all the aforesaid income is exhausted.

Estimated Source of Income: (including any other funding applied, external sponsorship)	Unit Price (HKD)	Quantity	Sub-total (HKD)	For Office Use
Programme/ enrolment fee from participants)	
Budget from Society/ Club			/	
Funding from University/ College/ School/ Department				
External sponsorship				
Total Estimated Income:				
Estimated Expenditure: (Students are advised to arrange their own travel insurance and include such costs into the budget.)	Unit Cost (HKD)	Quantity	Sub-total (HKD)	
Accommodation:night(s)			- 	
Admission/ registration fee				
Flight				
Inner-city transportation in destination				
Printing/ publications				
Programme materials			' - 	
Travel insurance			J 	
Trainer/ instructor costs		!	{	
		; ! !	;	
			,	
Total Estimated Expenditure:		! ! !	 	
Total Estimated Expenditure: Subsidy Requested from SDS: (Total Estimated Expenditure - Total Estimated Income)				

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(Total Estimated Expenditure - Total Estimated Income)

PART III – Declaration

I have read and understand the Application Guidelines of the Student Non-Local Activity Fund. I hereby declare that the information provided in this form is **true** and **accurate.**

Signature of Applicant	Stamp of Student Society (if applicable)	Date	
For Office Use Only			
Comments:			
		Responsible Staff	<u>Date</u>
 Application received 			
Interview (if any)			
• Amount recommended: H	K\$		
Source of fund:			
☐ NA Fund			
\square Other source (please sp	ecify):		
Amount approved: HK\$			
from the recommended sourc *Responsible EO (≤\$5000); ADSD	e of fund (>\$5,000-10,000); DSD (above \$10,000)		
 Recorded 			
Reply letter			
Report, audited financial s	tatement & receipts		
(Deadline:)		
• Reimbursement			
Signed receipt of subsidy of subsidy of subsidy of subside subsid	collected from participants		

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