

## STUDENT ACTIVITY FUND (LOCAL ACTIVITIES)

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 Activity Fund (Local Activities) 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**

Type of Application: <input type="checkbox"/> Individual <input type="checkbox"/> Group; No. of participants: _____
Name of Applicant/ Group Leader: (Mr. / Miss*) _____ Student ID: _____
Name of Society (if applicable): _____ Position (if applicable): _____
Programme of Study: _____ Year of Study: _____
Contact No.: _____ E-mail Address: _____

*\*Please select as appropriate.*

#### **PART II – Activity Details**

*(Please attach separate sheets to answer the questions below if necessary.)*

1. Name of Activity: \_\_\_\_\_
2. Date(s)/ Period: \_\_\_\_\_
3. Venue: \_\_\_\_\_
4. Objective(s) of the Activity: \_\_\_\_\_

5. Content:

*(Please specify the programme rundown and attach the details if available.)*

6. How do the programme objectives and content relate to the following aspects?

*(Please refer to the application guidelines for details.)*

**(1) C** — Community Outreach ; **(2) I** — Internationalization ; **(3) A** — Academic Integration

7. How will the programme outcomes be measured?

8. Follow-up plans/ activities:

9. No. of Target Participants:

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

	No. of CityU Students	No. of non-CityU Students <i>(Please specify.)</i>
7.1 Organizing 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.)*



**PART III – Declaration**

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

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Stamp of Student Society  
(if applicable)

\_\_\_\_\_  
Date

**PART IV – Students’ Union Endorsement**

Applications submitted by SU student societies must be first endorsed by the SU President/ Council.

Endorsed by: \_\_\_\_\_  
SU President / Council

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

**For Office Use Only**

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

	<u>Responsible Staff</u>	<u>Date</u>
• Application received	_____	_____
• Interview (if any)	_____	_____
• Amount recommended: HK\$ _____		
Source of fund:		
<input type="checkbox"/> SA Fund		
<input type="checkbox"/> Other source (please specify): _____	_____	_____
• Amount approved: HK\$ _____		
from the recommended source of fund	_____	_____
• Recorded	_____	_____
• Reply letter (c.c. SU President & Council / Dept / Div)	_____	_____
• Report, audited financial statement & receipts (Deadline: _____)	_____	_____
• Reimbursement	_____	_____
• Signed receipt of subsidy collected from participants	_____	_____