






**Student Development Services (SDS)
Student Life and Resources Section**

**Activity Proposal Form
(For Student Organisations registered under SDS)
SAMPLE- For Reference Only**

1. Information of the Activity Organisers			
Name of Organisation	Photography Club		
Supported by another department	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Department:	
		Advisor Name:	
		Email:	
Person-in-charge	Student 1	Student 2	
Full Name in English	Chan Tai Ming	Lee Siu Ming	
Full Name in Chinese (if any)	陳大文	李小明	
Position in Organisation	Chairman	Marketing	
Student ID	51234567	52345678	
Email Address	tmchan2_C@my.cityu.edu.hk	smlil2_C@my.cityu.edu.hk	
Contact No.	9234 5678	6123 4567	
Signature			
Stamp of Organisation and Date of submission	 1 May 2024		

2. Details of Activity				
Name of activity				
Is this activity included in the annual plan?		<input checked="" type="radio"/> Yes / No		
Will sponsorship be solicited for the activity? (Student organisation are not allowed to seek sponsorship without obtaining SDS approval)		<input checked="" type="radio"/> Yes / No (If applicable, please submit the Application Form for Accepting Sponsorship attached in the Appendix.)		
Objective of activity	Provide professional training to members who are interested in photo shooting			
Date and time of activity	11 Sept to 9 Oct 2024 1200-1400	Frequency	<input type="checkbox"/> One-off <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly	Total number of sessions: <u>4</u>
Activity nature <i>(please choose one by ticking (✓) the box)</i>	<input checked="" type="checkbox"/> Training/Workshop <input type="checkbox"/> Exhibition <input type="checkbox"/> Seminar/Talk <input type="checkbox"/> Competition	<input type="checkbox"/> Orientation (Including O-day/O-night/O-camp) <input type="checkbox"/> Performance <input type="checkbox"/> Ceremony		<input type="checkbox"/> Others (please specify): _____
Mode of delivery (please circle)	Online/ <input checked="" type="radio"/> Face to Face / Hybrid	Activity venue	R6023, Student Centrum	
Registration required	<input checked="" type="radio"/> Yes / No	Admission fee per head	\$ 0	
Expected number of participants	CityUHK Students		15	
	CityUHK Alumni		/	
	Non-CityUHK Students		/	
	External (please circle) Performer/ Speaker/ Judge/ Co-organizer/ Contestant/ <input checked="" type="radio"/> Tutor / Other: _____		1	
	Total		16	
Support from SDS (please indicate if needed)	<input type="checkbox"/> Display banner (max 6ft x 8ft)		Please contact the liaison officer to inquire about the availability of the banner location and send the draft of the banner for SDS's review before printing.	
	<input checked="" type="checkbox"/> Send mass email for publicity		Please also contact the liaison officer.	
	<input type="checkbox"/> Post poster on display boards/e-panels			
	<input checked="" type="checkbox"/> Reserve venue/classroom			
	<input type="checkbox"/> Prepare equipment		Please submit Student Activity Fund application before making any expenditures for the event.	
<input type="checkbox"/> Provide funding				

	<input checked="" type="checkbox"/> Arrange QR Code for campus access	Please submit required information at least three days before the event.
	<input type="checkbox"/> Other:	

3. Committees of Activity					
	Name	SID	Email	Year of Study	Role in the activity
1	Chan Tai Man	51234567	tmcha2_c@my.cityu.edu.hk	3	Chairman
2	Lee Siu Ming	52345678	smli2_C@my.cityu.edu.hk	2	Marketing
3	Cheung Yuk Shan	53456789	yujshab3_c@my.cityu.edu.hk	1	Vice President

4. Particulars of Activity
(Please fill in **either** table A or B according to your activity duration/nature.)

Please add row(s) if necessary.

A. Proposed schedule for activities spanning multiple days (e.g O-camp, series of workshops)

Session 1/Day1	Lighting Usage 1
Session 2/Day 2	Portrait Shooting
Session 3/Day 3	Landscape Shooting
Session 4/Day 4	Lighting Usage 2

B. Proposed rundown for one-day activity (e.g. O-day/O-night)

Time	Rundown
0900-0930	Take the roll call
0930-1030	Breakfast at Campsite canteen
1030-1500	Ice-breaking games
1500-1800	Team building games and camp fire
1800-1930	Dinner at Campsite canteen
1930-2000	Clean up the Venue and leave the campsite

5. Budget (Please add rows as necessary.)					
	Source of funding	Unit Price	Quantity	Subtotal	Source
1	Admission fee	\$300	30	\$9,000	participants
Total				\$9,000	
	Expenditure	Unit Price	Quantity	Subtotal	Source
1	Banner	\$200	1	\$200	Banners shop
2	Souvenir -bracelet	\$30	40	\$1,200	Pinkoii
3	Souvenir -note book	\$10	40	\$400	Taobao
4	T Shirt	\$70	40	\$2,800	ABC Shop
Total				\$4,600	

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Ref no.	Date received	Staff name	Signature	Remarks



**Student Development Services (SDS)
Student Life and Resources Section**

**Application for Accepting Sponsorship
(For Student Organisations registered under SDS)**

Application Form

SAMPLE- For Reference Only

PART I- Details of the Student Organisations

Name of the Student Organisations: CityUHK Photography Club

Responsible Person (i.e. The Applicant)

Name: (Mr./ Miss) Chan Tai Man

Student ID: 51234567

Position: Chairman

Contact No.: 9234 5678

Email Address: tmchan2_C@my.cityu.edu.hk

PART II- Details of the Sponsorship

1 Name of the Sponsor: Health Food Co, Ltd

2 Contact Person: Gigi Chan

Title of the contact person: PR Officer

Contact No.: 3443 0000

3 Details of the sponsorship:

Cash \$_____ Samples: (please specify):_____

Other products(please specify):Energy Bars and energy drinks

4 Sample/ Product details:

Please add row(s) if necessary.

Item(s)	Quantity	Valuation
Energy Bars-Nuts	20	\$430
Energy Bars-Fruits	20	\$430
Vitamin Water	20	\$220

5 Acknowledgement given to the sponsor:

Yes, please specify: Share 2 posts on the Instagram of the photography club

No

6 Targeted recipients of the sponsorship(please state the total no.of recipients) : 60 photography clubs members

PART III- Declaration

- I have read and complied all the Application Guidelines for Accepting Sponsorships. I hereby declare that the information provided in this form is true and accurate.
- I have discussed the sponsorship with the committee in my organisation on the above application.
- I hereby declare that I and my organisation have no conflicts of interest in relation to the contact person/company of sponsorship in accordance with no conflict of interest stated in University Policies.

OR

- I wish to declare conflicts of interest: *contact person/company of sponsorship with *who/which I and my organisation have official dealings, the relationship with the *contact person/company.





1 May 2024

Signature of Requestor
Name:
Title:

Signature of Student
Organisation Approver
Name:
Title:

Stamp of Student
Organisation
(if applicable)

Date

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	Assessment Areas	Complied
1	Sponsorship comes from reputable sources.	
2	Acceptance of this application does not violate the regulations and affect the reputation of the university.	
3	The items from sponsor are not harmful to students or student organisations. (If applicable)	
4	There are no legal responsibilities for students, student organisations and the university to bear.	
5	The conditions made by sponsors are achievable for student organisations.	
6	The student organisation has related experience in accepting sponsorships.	
7	Responsible staff would recommend the application.	
8	Responsible staff has no conflict of interest in relation to the contact person of sponsorship and this application.	
9	Other comments:	

Signature of Responsible SDS Staff

Date

Name: