Student Development Services (SDS)
Student Life and Resources Section

<u>Activity Report Form</u>
(Please type or write clearly in black.)

Notes to Student Activity Organisers:

1. Personal data provided in this form will be used only for processing related administrative matters.
2. The completed form should be submitted to Student Development Services (6/F, Bank of China (HK) Complex, City University of Hong Kong) or emailed to sdssat@cityu.edu.hk **within 1 month** of the completion of the activity.
3. Any misrepresentation of information in the Activity Report Form may lead to the disqualification of the student organisations' renewal for a new term. The University reserves the right to terminate the term of student organisations if violation of regulations happens.

1. Information of the Activity Organisers		
Name of Organisation **(For Student Organisations registered under SDS only)**		
Contact Person	Student 1	Student 2
Position in Organisation		
Full Name in English		
Full Name in Chinese (if any)		
Student ID		
Email Address		
Contact No.		
Signature		
Stamp of Organisation **(For Student Organisations registered under SDS only)**		
Date of Submission		

2. Activity Report			
Name of Activity			
Total Number of Organised Sessions:		Frequency (if applicable)	☐ One-off ☐ Weekly ☐ Monthly
Date (DD/MM/YYYY)	From	to	
Time	From	to	
Mode of Delivery	Online/ Face to Face/ Hybrid	Activity Venue	
Registration Required	Yes / No	Actual Admission Fee Per Head	$

Number of Participants	Type of Participants	Planned Number	Actual Number
	CityU Students		
	CityU Alumni		
	Non-CityU Students		
	External (please circle) Performer/ Speaker/ Judge/ Co-organiser/Contestant/ Tutor/ Other: _____		
	Total		

3. Post-activity Evaluation (Please list out in point form)	
a) How would you describe the activity?	
b) What are the activity outcomes?	

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c) What have you learnt form organising the activity?	
d) If this activity will be re-run again, how will you improve?	
e) Evaluation/ feedback from the participants? *(Share KPI if applicable – overall scores/ figures of participants' evaluation form)*	

4. Actual Income & Actual Expenditure (Please add rows as necessary.)					
	Actual Source of Funding	**Unit Price**	**Quantity**	**Subtotal**	**Source**
1					
2					
3					
4					
			Total		
	Actual Expenditure	**Unit Price**	**Quantity**	**Subtotal**	**Source**
1					
2					
3					
4					
			Total		

5. Supporting Documents (Please attach them as an appendix to this report form)

    a)   Participants List *(If applicable – Please include the participants' SID if registration is required for the activity)*

    b)   Activity Photos
       (Please attach <u>at least 5 photos</u>; MUST attach <u>at least 1 photo which can prove the scale of your activity</u>, i.e., photo capturing the number of participants)

For Office Use Only				
Ref no.	Date received	Staff name	Signature	Remarks