

**Student Development Services (SDS)**

**Student Life and Resources Section**

**Activity Proposal Form**

**(For applying under Student-Led Activities)**

 (Please type or write clearly in black.)

Notes to applicants:

1. The completed form with supporting documents (if applicable) 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 **at least one month before the intended event date**.
2. Proposing teams will be notified of the application results via email. To accept the offer, the proposing team is required to acknowledge via email.
3. Any incomplete or missing information in the Activity Proposal Form may lead to the delay in processing. The University reserves the right to terminate the proposed activities if violation of regulations happens.
4. Personal data provided in this form will be used only for processing related administrative matters. The Activity Proposal Form will be kept for one year after submission and will be destroyed afterward without further notice.

|  |
| --- |
| **1. Information of the Activity Organisers** |
| Name of Applicants |  |
| Name of activity(English and Chinese, if applicable) |  |
| Endorsed by full-time staff advisor (at the rank of Executive Officer or above) | Department: |
| Advisor Name: |
| Email:  |
| Person-in-charge | Student 1 | Student 2 | Student 3 |
| Full Name in English |  |  |  |
| Full Name in Chinese (if any) |  |  |  |
| Student ID |  |  |  |
| Email Address |  |  |  |
| Contact No. |  |  |  |
| Signature |  |  |  |
| Date of submission |  |

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| **2. Details of Activity** |
| Will there be sponsorship solicited for the activity?(Students and student organisations are not allowed to seek sponsorship without obtaining SDS approval) | Yes / No(if yes, please submit sponsorship form) |
| Objective of activity |  |
| Date and Timeof activity |  | Frequency | 口One-off口 Weekly口 Monthly | Total number of sessions: \_\_\_\_\_ |
| Activity nature*(please choose one by ticking(✓) the box* |  | Training |  | Exhibition |  | Ceremony |
|  | Competition |  | Seminar/Talk |  | Performance |
|  | Networking Event |  | Others (please specify):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Mode of Delivery | Online/ Face to Face/ Hybrid | Activity Venue |  |
| RegistrationRequired | Yes / No | Admission fee | $ |
| Planned number of participants | CityU Students |  |
| CityU Alumni |  |
| Non-CityU Students |  |
| External (please circle)Performer/ Speaker/ Judge/ Co-organiser/ Contestant/ Tutor/ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| **Total** |  |
| Support from SDS(please indicate if needed) | 口Display banner (max 6ft x 8ft) | Please check availability of the banner location with SDS Staff and send the draft of the banner for SDS’s review before printing. |
| 口Issue email through CityU Announcement Portal (CAP) | Please send the draft of the banner to SDS staff and please note that SDS will not help print the posters. |
| 口Post poster on display boards |
| 口Provide funding | Please submit Student Activity Fund application before making any expenditures for the event. |
| 口Arrange QR Code for campus access | Please submit required information at least three days before the event. |
| 口Other: |

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| **3. Committees of Activity** |
|  | Name | SID | Email | Year of Study | Role in the activity |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |

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| **4. Particulars of Activity** |

Please refer to the related templates and add rows as necessary.

**Template 1- Schedule for multi-session activity**

|  |  |
| --- | --- |
| Week 1 |  |
| Week 2 |  |
| Week 3 |  |
| Week 4 |  |

**Template 2- Timetable for Consecutive days activity**

**(**For overnight activity, please also provide the content)

|  |  |  |
| --- | --- | --- |
| Date | Time | Content (\*Please provide objective, format and PIC for each activity) |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Template 3- Rundown for One day activity**

|  |  |  |
| --- | --- | --- |
| Time | Rundown | Remark |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

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| --- |
| **5. Budget (**Please add rows as necessary.) |
| # | **Source of funding** | **Unit Price** | **Quantity** | **Subtotal** | **Source** |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| **Total** |  |  |
| **#** | **Expenditure** | **Unit Price** | **Quantity** | **Subtotal** | **Source** |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| **Total** |  |  |

|  |
| --- |
| **5.1 Quotation support (if necessary)** |
| Item | Supplier | Price | Source (Cap screen/ Link) | Selected supplier (✓) |
|  | 1 |  |  |  |  |
| 2 |  |  |  |  |
|  | 1 |  |  |  |  |
| 2 |  |  |  |  |

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