



Associated Students, Inc.

Funding Request Form

2017-18

"...For the Students, by the Students"

Necessary Documents:

- ☐ Event Flyer w/ A.S.I. Logo
- ☒ CSI Event Reg. Form
- ☐ Estimates / Food Permits
- ☒ Event Estimates / Invoices

Contact

Officer Name: _____
 Officer Title: _____
 Address: _____
 City/State/Zip: _____
 Phone & Email: _____
 Officer Signature: _____

Organization

Club/Organization: Food science and Technology Associa
 Event Title: Wasted Movie Screening
 Date(s) of Event: 11/30/17 Semester Fall
 Location of Event: CSULA
 Expected Total Attendance: 50
 Expected Attendance of Cal State LA Students: 50

Event Description and Total Cost Breakdown

Briefly describe the event:

It's the screening of the movie wasted that shows how food waste contributing to climate change.

Is the event open to all Cal State LA students?: **Select One...**

How will this program enhance the Cal State LA experience?:

It helps to change the way people buy, cook, recycle and eat food. It also helps to see how each of us can make small changes to solve this issue.

Hospitality

Description	Amount
	0.00

Honoraria/Contracts

Description	Amount

Marketing

Description	Amount

Other

Description	Amount
Movie Screenig Right	315.00

Event Summary

Total Cost of Event: 0
 Amount Requested from A.S.I.: 315.00
 Amount from other sources: _____
 What other resources are you employing for this event? _____

For Office Use Only • Do Not Write Below

Important:

- (1) All Funding Request Forms must be turned in by 12 PM Friday, the week before the Funding Sub-Committee Meetings.
- (2) Additionally, funding request forms must be turned in no less than 10 business days (2 weeks) prior to the event.
- (3) Deadline for Request for Payment or Purchase Order (RPP) is 15 days after the event.

All forms must have a Time Stamp and

staff initial:

du

17 NOV 14 PM 1:18:25

STUDENT ORGANIZATION EVENT REGISTRATION FORM

COMPLETED



This form must be completed 10 business days prior to the event date. Reservations for on campus events will not be confirmed unless this form has been completed. No publicity may be distributed or posted online until this form has been submitted for off campus events or until the reservation confirmation process has been completed for on campus events. Signatures must be ink.

NAME OF ORGANIZATION: Food Science & Technology Club PHONE: _____
EVENT CONTACT NAME: Violet Perez EMAIL: _____
NAME OF EVENT: Wasted! The story of Food Waste LOCATION: U-SU Theatre 106
EVENT DATE: 11/30/2017 BEGIN TIME: 4:30 PM END TIME: 6:30 PM ESTIMATED ATTENDANCE: 50

TYPE OF ACTIVITY (THE UNIVERSITY'S GENERAL RELEASE WILL BE REQUIRED FOR CERTAIN EVENTS.)

- ☐ BENEFITS TO PROCEED ☒ EDUCATIONAL PROGRAM ☐ SPIRITUAL PROGRAM ☐ RECREATIONAL PROGRAM
☐ DANCE/PARTY ☐ SOCIAL PROGRAM ☐ COMMUNITY SERVICE ☐ CONFERENCE/CONVENTION
☐ OTHER: _____

WILL YOUR EVENT INCLUDE ANY OF THE FOLLOWING? (PLEASE CHECK ALL THAT APPLY)

- ☐ SPORTS ACTIVITY OR COMPETITION ☐ FOREST/PARK CLEAN-UP ☐ INTERNATIONAL TRAVEL
☐ BEACH CLEAN-UP ☐ INDOOR/OUTDOOR COOKING ☐ DOMESTIC TRAVEL
☐ BEACH BONFIRE

PLEASE DESCRIBE THE EVENT BELOW (INCLUDE ALL ACTIVITIES):

Showing a documentary "Wasted" to bring awareness to students about food waste and what they can do to alleviate the problem.

WHO IS INVITED (CHECK ALL THAT APPLY):

- ☒ STUDENT ORG. MEMBERS ☒ CAL STATE LA COMMUNITY ☐ OTHER COLLEGES & UNIV. ☐ GENERAL PUBLIC ☐ GUEST LIST

Events intended for the general Cal State LA campus will be listed in the Student Organization Calendar of Events distributed in a bi-weekly email by the Center for Student Involvement.

☐ NO, I DO NOT WISH FOR MY EVENT TO BE POSTED.

WILL THE EVENT HAVE AN ADMISSION CHARGE, REGISTRATION, PARTICIPATION FEE, OR RAISE ANY PROCEEDS TO BENEFIT THE ORGANIZATION? (If yes, please complete statement regarding proceeds to benefit transactions on the back of this form) ☒ NO ☐ YES

WILL A MOVIE BE SHOWN? ☐ NO ☒ YES (If yes, please attach written proof of viewing rights.)

WILL THE EVENT HAVE SECURITY? ☒ NO ☐ YES If yes, please explain _____

WILL FOOD BE SERVED AT THE EVENT? ☒ NO ☐ YES

IF YES, WHO WILL PROVIDE THE FOOD? ☐ UNIVERSITY CATERING ☐ OTHER: _____

A completed food permit is required for all on-campus events with food unless the food is provided by University Catering.

WILL ALCOHOL BE PRESENT AT THE EVENT? ☒ NO ☐ YES. Please attach a completed request to serve alcoholic beverages. (This form may take up to two weeks for review and possible approval.)

WILL THE EVENT BE HELD IN A RESTAURANT/VENUE WHERE ALCOHOL IS AVAILABLE? ☒ NO ☐ YES
If so, please affirm organization members and guests will not consume alcohol.

Initials

PLEASE LIST 2 TIPS TRAINED MEMBERS ON PAGE 2.

WILL OFF-CAMPUS MEDIA BE NOTIFIED ABOUT THE EVENT (NEWSPAPER, TV, RADIO, ETC.)? ☒ NO ☐ YES, PLEASE PROVIDE WHO WILL BE INVITED ON PAGE 2.

DOES THE STUDENT ORGANIZATION WANT TO PURCHASE SPECIAL EVENT INSURANCE FOR THIS EVENT? ☒ NO ☐ YES

Please be aware that student organization events are not covered for liability or other insurance by California State University, Los Angeles or the University-Student Union. Student organization officers or the advisor may be held personally liable. If the student organization would like to purchase Special Event Insurance for a particular event, please contact CSI.

RECEIVED
STUDENT ORGANIZATION

STATEMENT REGARDING PROCEEDS TO BENEFIT TRANSACTIONS

As officers of this recognized student organization at Cal State LA, we affirm that all proceeds raised or assets assigned will be used solely for the benefit of the organization as a whole. Further, it is affirmed that no proceeds or assets of this organizations will accrue to the benefit of any officer, member, or any private person. We also affirm that all proceeds transactions for this event will comply with all University policies and procedures including but not limited to ICSUAM Policy 3141.01 and the Cal State LA Student Organization Funds Administration Policy. Describe the admission charge, registration, participation fee, or any proceeds that will be raised to benefit the organization. Please include how much the organization will be charging for any of these proceeds.

PRESIDENT:

SIGNATURE:

DATE:

TREASURER:

SIGNATURE:

DATE:

EVENT GUIDELINES

The following guidelines are provided for the benefit of the student organization. They are intended to be followed completely. Failure to comply with any of the following guidelines may result in disciplinary action taken against the organization including suspension of recognition, events and use of facilities. More information can be found online in the Student Organization Handbook.

- CONDUCT:** The organization assumes full responsibility for the conduct of participants at the event. Any violation of University policy may subject the participants and/or the organization to disciplinary action by the Center for Student Involvement or Student Conduct.
- ALCOHOL:** In accordance with Administrative Procedure 019 - Alcoholic Beverages, any event (on or off campus) that involves the consumption of alcoholic beverages requires authorization from the University. Your organization must complete and submit a Request to Serve Alcoholic Beverages form in addition to this Event Registration Form. Please allow at least 3 weeks for this form to be reviewed by the University. Approved alcohol consumption events and events held where alcohol is available (but will not be consumed) require at least two TIPS certified members to be in attendance of the entire event. Additional guidelines may be enforced.
- PUBLICITY:** All publicity material must have the name of the sponsoring group and the following statement: "The actions and opinions of this organization do not necessarily reflect those of the students, staff, faculty, or administration of Cal State LA."
- GENERAL RELEASE:** If your event will require the use of general release waivers prior to organization member and guest participation, your organization is required to comply with all instructions provided by CSI, including submitting all completed forms and requested documents.

MY SIGNATURE BELOW INDICATES THAT I WILL TAKE RESPONSIBILITY TO ENSURE THAT THE EVENT WHICH MY ORGANIZATION IS SPONSORING WILL FOLLOW ALL GUIDELINES SET FORTH BY THE UNIVERSITY. I ACKNOWLEDGE THAT THIS EVENT AND ANY ASSOCIATED EVENT SPACE RESERVATIONS MAY BE SUBJECT TO CANCELLATION BASED ON MY ORGANIZATION'S RECOGNITION STATUS.

STUDENT ORG. OFFICER'S NAME

SIGNATURE (PLEASE USE BLUE OR BLACK INK ONLY)

DATE:

ADVISOR'S NAME

Violet Perez
Jing Zhao

V. Perez
J. Zhao

10/19/2017
10/19/2017

ACKNOWLEDGMENT - FOR OFFICE USE ONLY

CENTER FOR STUDENT INVOLVEMENT (U-SU 204)

CSI VERIFIES THE ORG. IS RECOGNIZED BY THE UNIVERSITY

ASSISTANT DEAN OF STUDENTS: WELLNESS & ENGAGEMENT

GENERAL RELEASE REQUIRED FOR ALL PARTICIPANTS? ☐ NO ☐ YES DATE REQUIRED:

NOTIFICATIONS:

☐ PUBLIC AFFAIRS

DATE:

☐ ATHLETICS

DATE:

☐ DEPT. OF PUBLIC SAFETY

DATE:

☐ FACILITIES USE COORDINATOR

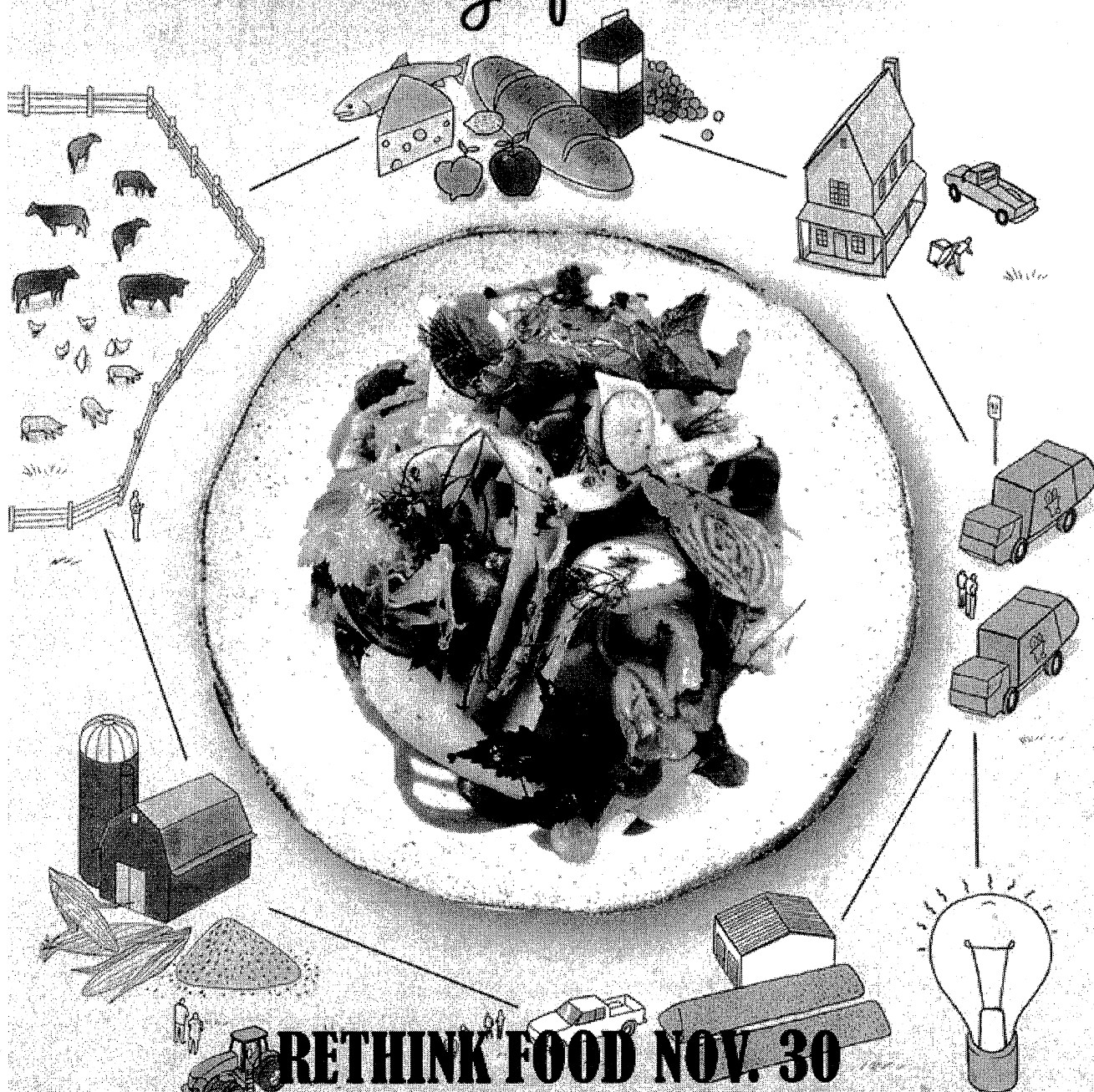
DATE:

NOTES OR UPDATES:

FROM EXECUTIVE PRODUCER ANTHONY BOURDAIN

WASTED!

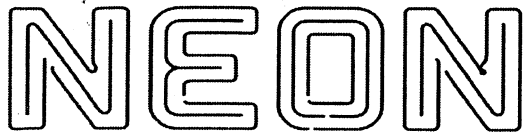
The Story of Food Waste



RETHINK FOOD NOV. 30

HOSTED BY: FOOD SCIENCE & TECHNOLOGY ASSOCIATION
U-SU THEATRE (ROOM 106A)

ASI



INVOICE: INV000000001023

Date:10/23/2017

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Neon Rated LLC
612A East 6th Street
Austin, TX 78701

Bill To: Violet Perez

Purchase Order	Customer ID	Salesperson ID	Shipping Method	Payment Terms ID
	CALUNIVERSITY			Upon Receipt
Description:				Amount
WASTED One-Time Public Screening Fee for 30/11/17				\$ 295.00

Remit Checks To: PO Box 2748 San Antonio, TX 78299
EFT Instructions: Frost Bank
Account: NEON RATED LLC - 591805835
ABA/Routing #: 114000093/Swift Code: FRSTUS44

Subtotal	\$ 295.00
Misc	\$ 0.00
Tax	\$ 0.00
Shipping	\$ 20.00
Trade Discount	\$ 0.00
Payment	\$ 0.00
Total Due	\$ 315.00