



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: Film Productions Club
Event Title: Golden Eagle Film Festival
Date(s) of Event: 05.10.18 Semester Spring Select One Fall Spring
Location of Event: USU Theatre
Expected Total Attendance: 150
Expected Attendance of Cal State LA Students: 125

Event Description and Total Cost Breakdown

Briefly describe the event:
Golden Eagle Film festival is an annual event hosted by California State University, Los Angeles in collaboration with Film Productions Club. The Festival showcases up and coming student filmmaker work.

Is the event open to all Cal State LA students? Yes Select One Yes No
How will this program enhance the Cal State LA experience?
Golden Eagle Film Festival encourages emerging student filmmakers to tell their stories from a new and fresh perspective.

Hospitality

Description	Amount
UAS	\$1,998.60

Honoraria/Contracts

Description	Amount
NA	0

Marketing

Description	Amount
NA	\$0.00

Other

Description	Amount
NA	0

Event Summary

Total Cost of Event: \$2000
Amount Requested from A.S.I.: \$1,998.60
Amount from other sources: \$2000

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: AM

'18 APR 18 PM 5:02:57

What other resources are you employing for this event?
TVFM Department at California State University, Los Angeles funds GEFF 2018 with a sum of \$2000 which can be spent on locations, decorations, posters, banners, and etc.

UPDATE

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STUDENT ORGANIZATION EVENT REGISTRATION FORM

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 completed in blue or black ink.

NAME OF ORGANIZATION: Film Productions PHONE: [REDACTED] DATE: May 10
 EVENT CONTACT NAME: [REDACTED] EMAIL: [REDACTED]
 NAME OF EVENT: Golden Eagle Film Festival LOCATION: CSULA, 15th Street 106
 EVENT DATE: May 10 BEGIN TIME: 5 pm END TIME: 9:30 pm ESTIMATED ATTENDANCE: 100 people

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: Film Festival

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

and
Outdoor
Plaza
(S)

PLEASE DESCRIBE THE EVENT BELOW (INCLUDE ALL ACTIVITIES):

Golden Eagle Film Festival is an annual event held at CSULA. It showcases up and coming filmmakers work.

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: catering sigma alpha epsilon
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 Initials [REDACTED] PLEASE LIST 2 TIPS TRAINED MEMBERS ON PAGE 2. If so, please affirm organization members and guests will not consume alcohol.

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

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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.

[REDACTED]

PRESIDENT: [REDACTED] SIGNATURE: _____ DATE: _____

TREASURER: [REDACTED] 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: [REDACTED] SIGNATURE (PLEASE USE BLUE OR BLACK INK ONLY): *[Signature]* DATE: _____

ADVISOR'S NAME: [REDACTED] SIGNATURE: *[Signature]* DATE: _____

ACKNOWLEDGMENT - FOR OFFICE USE ONLY

CENTER FOR STUDENT INVOLVEMENT (U-SU 204) SIGNATURE: *[Signature]* DATE: 3-1-18

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:

Pending submission/completion of insurance requirement from SAE *[Signature]* added outdoor place

[Signature]



**21st
Golden Eagle
Film Festival**

**May 10th
at 6:00pm in the
University Student
Union Theatre & Plaza**





Golden
Eagle
Hospitality

for: Event # E32876
on: Thursday, May 10, 2018

Client/Organization Film Productions Club	Event Date 5/10/2018 (Thu)	Booking Contact [REDACTED]	Event # E32876
Address 5151 State University Drive		City, St/Prov Postal Los Angeles, CA 90032	Booking Tel [REDACTED]
Party Name Film Productions Club Film Fest	Sales Rep Amanda Tapia	Theme	Category
			Guests 100 (Pln)

Venue

Description	Type	Start 5:30 pm	End 5:45 pm	Banquet Room Student Union	Setup Style Delivery
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Food & Beverage

Food/Service Items	Unit	Price	Total
Deliver to USU Theater at 5:45pm			
(100) -Disposables	Each	0.50	50.00
(10) Assorted Tea Sandwiches	Dozen(s)	12.00	120.00
(3) Vegetable Egg Rolls With Sweet And Sour Sauce	Dozen(s)	18.00	54.00
(3) Mini Quiche (Assorted)	Dozen(s)	15.00	45.00
(3) Grilled Beef Skewers With Soy Garlic Sauce	Dozen(s)	24.00	72.00
(2) Smoked Salmon Canapé With Dill	Dozen(s)	20.00	40.00
(2) Vegetable Pot Stickers with Sesame ginger Sauce	Dozen(s)	22.00	44.00
(1) Medium - Caesar Salad with Garlic Croutons (36-74pp)	Bowl(s)	75.00	75.00
(1) Medium- Israeli Cous Cous	Bowl(s)	75.00	75.00
(1) Medium- Greek Salad w/ Ranch Dressing	Bowl(s)	90.00	90.00
(1) Small - Hummus And Pita Chips (15-35pp)	Platter(s)	65.00	65.00
(1) Small - Salsa Roja With Tortilla Chips (15-35pp)	Platter(s)	55.00	55.00
(1) Small - Garden Fresh Crudités With Ranch (15-35pp)	Platter(s)	55.00	55.00
(1) Medium - Cheese and Deli Meat Platter with Crackers(36-74pp)	Platter(s)	85.00	85.00
(1) Large -Sliced Fruit Platter (75-100pp)	Platter(s)	110.00	110.00
(2) Dessert Brownies- cut in	Dozen(s)	25.00	50.00

Authorized Signature & Date: _____
(Please sign & date all pages)

half

-Chocolate Fudge

-Smores

(3) Assorted Baked Cookies	Dozen(s)	18.00	54.00
(1) Mini Pastries Variety Pack (30 pastries)	Each	65.00	65.00
(3) Chocolate-Dipped Strawberries	Dozen(s)	36.00	108.00
(3) Fresh-Brewed Coffee (Regular)	Gallon(s)	28.00	84.00
(5) Pink Lemonade	Gallon(s)	22.00	110.00
(3) Fruit-Infused Water	Gallon(s)	18.00	54.00

Water Service

	Food	Beverage	Liquor	Equipment	Labor	Room	Other	Total
Subtotal	1,312.00	248.00	0.00	0.00	0.00	0.00	0.00	1,560.00
Service Charge	223.04	42.16	0.00	0.00	0.00	0.00	0.00	265.20
Taxes	145.83	27.57	0.00	0.00	0.00	0.00	0.00	173.40
Total	1,680.87	317.73	0.00	0.00	0.00	0.00	0.00	1,998.60

Subtotal	1,560.00	Paid	0.00
Tax	173.40	Balance	1,998.60
Service Charge	265.20		
Total Value	1,998.60		

Banquet Event Order is invalid unless signed and returned along with a check or purchase order to the Golden Eagle Hospitality Office. Missing catering equipment is the responsibility of the Authorized Signee. A 17% Service Fee and 9.5% Sales Tax will be Charged where applicable. 72 Hours Guest Count Confirmation and Cancellation Notice Needed.

Account # _____
 Fund # _____
 Dept # _____
 Program Code # _____
 Project ID # _____
 Purchase Order # _____

Authorized Signature & Date: _____
 (Please sign & date all pages)