

# ASI Associated Students, Inc.

## Funding Request Form

2018-19

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

b b.

**Necessary Documents:**

- Event Flyer w/ ASI Logo
- CSI Event Reg. Form
- Estimates / Food Permits
- Event Estimates / Invoices

**Contact**

Officer Name: \_\_\_\_\_

Officer Title: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone & Email: \_\_\_\_\_

Officer Signature: *[Signature]*

**Organization**

Club/Organization: Vietnamese Student Association

Event Title: VSA Raising Cane's Fundraiser

Date(s) of Event: 4/11/19 Semester Select One...

Location of Event: In front of King Hall

Expected Total Attendance: \_\_\_\_\_ 100

Expected Attendance of Cal State LA Students: \_\_\_\_\_ 99

**Event Description and Total Cost Breakdown**

Briefly describe the event:

We will be selling chicken fingers from Raising Cane's to raise funds for our events as well as recruit new members

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

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

This fundraiser will give students alternative, delicious, and affordable food options for lunch.

**Hospitality**

Description	Amount
100 pc. chicken fingers	\$109.99
Addtl. 100 pc. Chicken Fingers	\$316.77

**Honoraria/Contracts**

Description	Amount

**Marketing**

Description	Amount

**Other**

Description	Amount

**Event Summary**

Total Cost of Event: \$0.00

Amount Requested from ASI: \$426.76

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.

What other resources are you employing for this event?

**All forms must have a Time Stamp and**

staff initial: SK LN

19 FEB 15 4:49:59



*Raising*  
**Canne's**  
**CHICKEN FINGERS**

**FUNDRAISER**

IN FRONT OF KING HALL  
3/5, 4/11, & 5/9  
11-3PM

 @csulavsa

**ASU** ASSOCIATED STUDENTS, INC.  
THE ACTIVITIES AND OPINIONS PRESENTED ARE NOT  
NECESSARILY THOSE OF ASSOCIATED STUDENTS, INC.

# 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 completed in blue or black ink.**

NAME OF ORGANIZATION:  [Redacted] PHONE: [Redacted] DATE: [Redacted]  
EVENT CONTACT NAME: [Redacted] EMAIL: [Redacted]  
NAME OF EVENT:  Raising Cane's Fundraiser LOCATION:  In front of King Hall  
EVENT DATE:  5/14/19 BEGIN TIME:  1:00 END TIME:  5:00 ESTIMATED ATTENDANCE:  100

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

<input checked="" type="checkbox"/> PROCEEDS TO BENEFIT	<input type="checkbox"/> EDUCATIONAL PROGRAM	<input type="checkbox"/> SPIRITUAL PROGRAM	<input type="checkbox"/> RECREATIONAL PROGRAM
<input type="checkbox"/> DANCE/PARTY	<input type="checkbox"/> SOCIAL PROGRAM	<input type="checkbox"/> COMMUNITY SERVICE	<input type="checkbox"/> CONFERENCE/CONVENTION
<input type="checkbox"/> OTHER: [Redacted]	<input type="checkbox"/> SPEAKER/PANEL		

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

<input type="checkbox"/> SPORTS ACTIVITY OR COMPETITION	<input type="checkbox"/> BEACH/FOREST/PARK CLEAN-UP	<input type="checkbox"/> INTERNATIONAL TRAVEL
<input type="checkbox"/> BONFIRE	<input type="checkbox"/> INDOOR/OUTDOOR COOKING	<input type="checkbox"/> DOMESTIC TRAVEL
<input type="checkbox"/> AMPLIFIED SOUND	<input type="checkbox"/> ANIMALS	

PLEASE DESCRIBE THE EVENT BELOW (INCLUDE ALL ACTIVITIES):

We will be selling chicken fingers purchased from Raising Cane's

HOW WILL YOU MARKET THIS EVENT? (CHECK ALL THAT APPLY)

PRINTED POSTCARDS  PRINTED POSTERS/FLIERS  SOCIAL MEDIA:  INCLUDE SITE & HANDLE:  INSTA:  OTHER: [Redacted]

WHO WILL BE 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 FEE, OR RAISE ANY PROCEEDS TO BENEFIT THE ORGAZNIZATION?  
(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 [Redacted]

WILL FOOD BE SERVED AT THE EVENT?  NO  YES  
IF YES, WHO WILL PROVIDE THE FOOD?  UNIVERSITY CATERING  OTHER:  Raising Cane's  
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 and SVPT TRAINED MEMBERS ON PAGE 2.  
If so, please affirm organization members and guests will not consume alcohol.

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.



# 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.**

for 2 on the left numbers, 35 for 3 on the left numbers

PRESIDENT: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
 TREASURER: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
 U-SU STUDENT ORGANIZATION ACCOUNT #: \_\_\_\_\_ or  APPROVED EXEMPT STATUS: CSI VERIFICATION

## 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 and two Sexual Violence Prevention & Resources Trained (SVPT) members to be in attendance of the entire event. Additional guidelines may be enforced.
- PUBLICITY:** All publicity material must comply with University Administrative Procedures AP P003 and AP P007. All printed marketing to be used for marketing registered events are required to be stamped by CSI prior to their approved posting. Stamps can be obtained after the event has been registered. All printed material may be posted for up to a period of fourteen (14) calendar days. For student organizations, the "POSTING VALID THRU \_\_\_\_" stamp must be clearly visible on the face of the posting.
- 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: 2/11/19  
 ADVISOR'S NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_ DATE: 2/11/19

## ACKNOWLEDGMENT - FOR OFFICE USE ONLY

CENTER FOR STUDENT INVOLVEMENT (U-SU 204) \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ DATE: 2/15/19  
 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: \_\_\_\_\_  
 OTHER DATE: \_\_\_\_\_  U-SU BUSINESS OFFICE DATE: \_\_\_\_\_  
 NOTES OR UPDATES: (TIPS-CERTIFIED/SVPT TRAINED MEMBERS, SOCIAL MEDIA SITES/HANDLES, INVITED MEDIA, ADDITIONAL INFORMATION/REQUIREMENTS)

CALIFORNIA STATE UNIVERSITY, LOS ANGELES  
TEMPORARY FOOD FACILITY PERMIT

Print Form

Clear Form

Date of Event: 3/5/19, 4/11/19, & 5/9/19 Estimated Attendance: 100

Name of Event: VSA Raising Cane's Fundraiser

Type of Event: Fundraiser Location: In front of King Hall

Sponsoring Organization: Vietnamese Student Association

Authorized Representative [Redacted] Phone [Redacted] Fax: \_\_\_\_\_

Time: \_\_\_\_\_

Access Time: 10:30 a.m./p.m. to 15:30 a.m./p.m.

Event Time: 11:00 a.m./p.m. to 15:00 a.m./p.m.

Type of Food Service:

- Bake Sale
- Snacks
- Food Sale
- Catering
- Barbecue
- Potluck
- Other (describe below)

(Provide caterer's complete name and address in space above this box; see Paragraph 6.2(e) in Temporary Food Facility Guidelines for further instructions.)

Describe Other: \_\_\_\_\_

List all food and potentially hazardous food (see Temporary Food Facility Guidelines for definition) items to be sold/served (include ingredients), use back of page if necessary. Raising Cane's chicken fingers, Raising Cane's sauce

Where will this food be prepared or purchased [Note no Home Baked/Cooked Items are Allowed]? Purchased from Raising Cane's in Downey.

List all beverages to be sold/served: N/A

Where will beverages be prepared or purchased? N/A

Method/s of maintaining proper holding temperatures for potentially hazardous food/s during transportation and service: Aluminum trays with covers.

**Agreement:** For the privilege of selling foods and/or beverages on campus, the Sponsoring Organization shall have attended a food handling orientation (offered at the beginning of Fall and Spring quarters), agrees to read, understand, and comply with the CSLA Temporary Food Facility Guidelines governing food sales or service. Failure to comply with the rules may result in the loss of food and/or beverage selling/serving privileges and possibly disciplinary action.

**Insurance:** (Student Organizations Only) As a prerequisite, the Sponsoring Student Organization agrees to obtain proper insurance coverage from the Associated Students, Inc. (ASI) at least two weeks prior to the event date and ASI agrees to include the Sponsoring Student Organization's activity in its insurance policy. This Temporary Food Permit will not be approved unless accompanied by a proof of ASI insurance.

No liability will be assumed by California State University, Los Angeles, University-Student Union, or University Auxiliary Services for any food or beverage the sponsoring organization provides to the campus community. This permit should be submitted at least 10 days prior to the activity for proper reviews and approvals; otherwise there is no guarantee of completion by the event date.

All signatures shall be obtained in the following order. Student organizations need all signatures; other organizations 1, 3 and 4 only.

[Signature] \_\_\_\_\_  
1. Signature of Sponsoring Organization Chairperson Authorized Representative to be present at event

2/11/19  
Date

2. Center for Student Involvement (UU 204) (Student Organizations Only)

[Signature] \_\_\_\_\_  
3. University Auxiliary Services, Inc. (Golden Eagle Bldg 314) Date

2/14/19  
Date

[Signature] \_\_\_\_\_  
4. Environmental Health & Safety (Corporate Yard Bldg. 244) Permit No. Date

19-167  
Permit No.

2/5/19  
Date

<b>Item</b>	<b>Unit Price</b>	<b>Units</b>	<b>Subtotal</b>	<b>Tax</b>	<b>Total</b>
100 pc. Chicken Fingers	\$ 99.99	1	\$ 99.99	\$ 10.00	\$ 109.99
Addtl. 100 pc. Chicken Fingers	\$ 95.99	3	\$ 287.97	\$ 28.80	\$ 316.77
					\$ 426.76



9265 Firestone Blvd  
Downey, Ca 92041  
562-861-5057

5 Stephani

-----  
Chk 3264          DONOTMKE          Gst 116  
                 Oct23'18 06:17PM  
-----

**Take Out**

1 100 TAILGATE	99.99
CUP OF SAUCE	
2 21oz CANES SAUCE	
1 ADD 100 FINGERS	95.99
INDV SAUCE	
33 CANES SAUCE	
1 ADD 100 FINGERS	95.99
INDV SAUCE	
33 CANES SAUCE	
1 ADD 100 FINGERS	95.99
CUP OF SAUCE	
2 21oz CANES SAUCE	
Cash	427.00
Subtotal	387.96
TAX	38.80
Payment	426.76
Change Due	0.24

\*\* Customer's Copy \*\*