FUNDING REQUEST FORM INSTRUCTIONS

IMPORTANT INFORMATION

- 1. All Funding Request packets must be submitted by 12 PM Friday, the week before the intended Funding Sub-Committee Meetings.
- 2. Funding request packets must be turned in no less than 5 business days (1 week) prior to the event.
- 3. Deadline for Request for Payment Processing (RPP) is 15 business days after the event. Awarded funds will be forfeited if all documents are not submitted by the 15 business day deadline.
- Physical quote(s) and estimates are required for all items listed. It is also suggested a detailed budget breakdown is provided.
- 5. Fill out the form completely, typed, without any handwritten information or edits.
- 6. Funding questions? email the ASI Vice Chair for Finance at asivcf@calstatela.edu
- For more information contact our administration office at 323.343.4778 or visit us online at: www.asicalstatela.org/funding

ASI FUNDING LIMITATIONS

- 1. Office supplies for student organization operations (e.g. paper, pens, clips, rubber bands, etc.).
- 2. Telephone Expenses
- Athletic equipment
- Materials or supplies for the purchase or care of live animals.
- An organization's or individual member's local, state, regional, or national membership fees.
- 6. An organization's or individual member's travel expenses; except as provided in the ASI Travel Policy 213.
- Membership recruitment of non-Cal State LA students. 7.
- 8. Programs for the benefit of, or targeted to, non-Cal State LA students.
- Activities considered to be high risk / high liability for or by the University or ASI.
- 10. Scholarships or scholarship donation.
- 11. Programs which are not in compliance with ADA standards

- 12. Programs exclusively benefiting or targeted to members of a specific group.
- 13. Race or gender specific awards ceremonies or programs
- 14. Programs and events that provide only one side of political issues and/or matters that are going to be considered by voters in upcoming elections.
- 15. Non-advertised programs occurring during an organization's regularly scheduled meeting(s).
- 16. Food, except when pre-approved for hospitality purposes.
- Salaries, fees, honorariums for instructors, tutors, or Cal State facultu.
- 18. Program equipment costing over \$300 that does not have at least three (3) written estimates.
- 19. Events held off-campus without University supervision or direction.
- 20. Events that involve Alcohol.
- 21. Not open to all Cal State LA Students.

FORM INSTRUCTIONS

PART 1

PART 2

MAKE SURE YOU CHECK ALL THE BOXES BEFORE SUBMITTING YOUR FORM.

CONTACT:

Only eligible officers (listed on the Student Organization Officer Information Form) from University recognized student organizations may request funds from ASI

STUDENT ORGANIZATIONS:

Only University-recognized student organizations may request funds from ASI.

EXPECTED TOTAL ATTENDANCE:

Indicate the total number of people expected at the event including faculty advisors, Cal State LA students, non-student guests, etc.

EXPECTED ATTENDANCE OF CAL STATE LA STUDENTS:

Indicate the total number of Cal State LA students expected to be in attendance at the event.

DESCRIBE THE EVENT:

What are you going to do? What are the goals of the event? If the box is too small please attach additional information describing the event.

IS THE EVENT OPEN TO ALL CAL STATE LA STUDENTS

Yes or No?

HOW WILL THIS PROGRAM ENHANCE THE CAL STATE LA COMMUNITY?

Why should we fund this event? If the box is too small please attach additional information.

All events with food are required to have an attached food permit. The only exception is if UAS caters the food.

HONORARIA/CONTRACTS:

ASI does not fund salaries or fees, honoraria for Cal State LA instructors, tutors, or faculty. All speakers/performers must have a valid contract and invoice signed prior to the event/performance. Paument cannot be made unless these items are completed.

PART 3

PART 4

Include the costs of flyers, banners, etc. Events which do not have a comprehensive marketing plan are usually not well attended and will therefore generally not be supported. (Attach Flyer include ASI Logo which can be download from our website.)

Due to State law, ASI Policies, and CSU Policies, there is a very long list of what ASI will not fund. See the funding limitations on the bottom of this page for a partial list. For a comprehensive list in Policy 204 Funding Guidelines, listed on the ASI Finance Policies and Procedures web page.

TOTAL COST OF EVENT:

The Total Cost will auto fill based on the amounts entered.

AMOUNT REQUESTED FROM ASI?

How much are you requesting from ASI?

AMOUNT FROM OTHER SOURCES

The amount requested from ASI and the amount from other sources should equal the total cost of the event.

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WHAT OTHER SOURCES ARE

List any fees, registration, dues, etc., which will be used to assist in paying for the total cost of the event.

FUNDING REQUEST FORM

PART 1 - NOTICE & CHECKLIST



1. All Funding Request Packets must be submitted by 12 PM Friday, the week before the Funding Sub-Committee Meetings.

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- 2. Funding Request Packets must be turned in no less than 5 business days (1 week) prior to the event.
- 3. Deadline for Request for Payment or Purchase Order (RPP) is 15 days after the event.

REQUIRED SUPPORTING MATERIAL

| , | SIEVENT REGISTRATION FORM | EVENTESTIMATES | / INVOICES (NOT PAID) | EVENT FLYER WITH ASILO | BASED ON PURCHASES/EVENT |
|---|---------------------------|----------------|-----------------------|---|--------------------------|
| PART 2 - CONTACT & ORGANIZATION | | | | | |
| OFF | OFFICER NAME: | | | CLUB/ORG: | |
| DFFICER TITLE: | | | EVENT TITLE: | | |
| ADDRESS: | | | | DATE(S) OF EVENT: | SEMESTER: |
| CITY: | | STATE: | ZIP: | EVENT LOCATION: | |
| PHONE: | | EMAIL: | | TOTAL ATTENDANCE: | |
| igi | NATURE: | | | EXPECTED CAL STATE LA STUD | DENTS ATTENDANCE: |
| PART 3 - EVENT DESCRIPTION | | | | | |
| S THE EVENT OPEN TO ALL CAL STATE LA STUDENTS? YES NO HOW WILL THIS PROGRAM ENHANCE THE CAL STATE LA EXPERIENCE? BRIEFLY DESCRIBE THE EVENT: | | | | | |
| PART 4 - COST BREAKDOWN | | | | | |
| HOSPITALITY | DESCRIPTION: | | AMOUNT: | DESCRIPTION: DESCRIPTION: O V V V V V V V V V V V V | AMOUNT: |
| MARKETING | DESCRIPTION: | | AMOUNT: | DESCRIPTION: | AMOUNT: |
| PART 5 - EVENT SUMMARY | | | | | |
| OFFICE USE ONLY | | | | | |

TOTAL COST OF THE EVENT

TOTAL REQUESTED FROM ASI

AMOUNT FROM OTHER SOURCES

WHAT OTHER RESOURCES ARE YOU EMPLOYING FOR THIS EVENT:

STAFF INITIALS

TIME STAMP:

