S&A Club/Program Event Check-list – Packet Due 2 Weeks Before Event/Travel

Exact Name of Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Club: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other clubs participating in event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*if more than one club/program is involved, lead club submits Check-list form

Student Contact- Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_ Email\_\_\_\_\_\_\_\_\_

Advisor Contact- Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_ Email\_\_\_\_\_\_\_\_\_

Date(s) of Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location of Event: ❑On Campus ❑ Off Campus (exact location)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Yes/No On Campus? Facility Request Form Attached

 Yes/No Food at Event? Sodexo Food Request Form Attached

 Yes/No Spending any Club Funds for Event? Complete Expense Authorization below

 Yes/No Fundraiser? Club Fundraiser Form Attached

 Yes/No M&O Work Order Submitted - Tables/Chairs/Barricades Set Up

 Yes/No Expenditure only? Complete Expense Authorization below

 Travel - Yes/No Club members attending?

 Travel Authorization Attached

 Student Advance/Meals Attached

 S&A Funded Travel Application Attached

 Travel Consent Forms Signed and Attached (green & white ones)

 Permission to Use Private Transportation Form (if applicable) Attached

 Yes/No Just Advisor?

 Travel Authorization Attached

**EXPENSE AUTHORIZATION**

Estimate Number of Students Involved in Activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List Projected Expenses for this Activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Student organization requests for expenditures must be submitted and approved by Student Programs Director **before** the event or travel occurs. All funding requests must be handled by the advisor – NO EXCEPTIONS. The student organization’s advisor must sign the funding request and have full knowledge of its contents. **All invoices or receipts for student organization expenditures must be submitted within thirty (30) days of the event/program/travel. The advisor’s signature must be on each receipt.**

**FUNDRAISER**

Type of Fundraiser (check one below; attach required supplemental documents if needed)

❑ Advertising ❑ Dues/Membership Fees ❑ Raffle\*

❑ Auction \* ❑ Event or Performance ❑ Service Sale

❑ Bake Sale ❑ Misc. Co-pay/Registration ❑ Tangible Item Sale

❑ Donations ❑ Other

\* Raffles, Bingo, Auctions and other games of chance may require a gaming license. Contact the Student Programs office prior to planning any such event to ensure compliance with state law.

Expected amount of funds to be raised: $

It is state law that all revenue raised from a fund-raiser be deposited with the College Cashier within 24 hours of the actual collection of the revenue. If there is a request for an exception to be made to depositing every 24 hours, then the funds must be deposited at least once a week. Criteria for an exception to the state law of making a deposit within 24 hours might include:

* A program/club that meets and/or collects fund-raising revenue once a week.
* A program/club whose students are pre-selling tickets for longer than one week.
* A program/club who is holding a raffle off-campus, or using students to sell tickets at more than one location.

**Contact the Student Programs office if your club has questions about the 24 hour deposit rule.**

I have read the BBCC Student Club Handbook and understand the consequences for non-adherence to college and state laws regarding fund-raising. As advisor, I am responsible for ensuring that all efforts are made to comply with these procedures.

**SERVICE EVENT**

❑ This event provides a service, such as bringing awareness to a cause, providing information about health or safety issues, assisting those in need, etc.
Please describe the service your event provides: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

Club Advisor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

The above program/club’s stated expenditure is authorized. The above program/club’s stated fund-raiser is authorized.

Director of Student Programs Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_