



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: ACCOUNTING SOCIETY
 Event Title: RESUME WORKSHOP
 Date(s) of Event: 2/23/18 Semester: Spring
 Location of Event: UNIVERSITY STUDENT UNION
 Expected Total Attendance: 40
 Expected Attendance of Cal State LA Students: 40

Event Description and Total Cost Breakdown

Briefly describe the event:

We will be going over the fundamentals of building a resume and then break into groups for hands-on activities. Officers will be giving feedback to those that bring in resumes.

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

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

Students will have greater marketability by having a more polished resume.

Hospitality

Description	Amount
Golden Eagle Hospitality	\$237.01

Honoraria/Contracts

Description	Amount

Marketing

Description	Amount
	\$0.00

Other

Description	Amount

Event Summary

Total Cost of Event: \$237.01
 Amount Requested from A.S.I.: \$237.01
 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: AM

18 FEB 15 PM 4:27:30

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: Accounting Society PHONE: _____ DATE: 1/24/18
 EVENT CONTACT NAME: Jeremy Lau EMAIL: _____
 NAME OF EVENT: Resume Workshop Part 1 LOCATION: USU Los Angeles C
 EVENT DATE: Feb 23, 2018 BEGIN TIME: 6pm END TIME: 9pm 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):

We will be introducing students to the basics of a resume.

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? YES Initials _____ PLEASE LIST 2 TIPS 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.

RECEIVED
 JAN 24 2018

FYI

BY: om

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: Jingyi Sarah Huang SIGNATURE: [Signature] DATE: 1/22/18
 TREASURER: To Nguyen SIGNATURE: [Signature] DATE: 1/23/18

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: Erika Hernandez SIGNATURE (PLEASE USE BLUE OR BLACK INK ONLY): [Signature] DATE: 1/22/18
 ADVISOR'S NAME: Xiaojie Sun SIGNATURE: [Signature] DATE: 1/22/2018

ACKNOWLEDGMENT - FOR OFFICE USE ONLY

CENTER FOR STUDENT INVOLVEMENT (U-SU 204) SIGNATURE: [Signature] DATE: 1.24.18
 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:



for: Event # E32329
on: Friday, February 23, 2018

Client/Organization Accounting Society	Event Date 2/23/2018 (Fri)	Booking Contact Erica Hernandez	Event # E32329
Address 5154 State University		City, St/Prov Postal Los Angeles, CA 90032	Booking Tel Guests 40 (Act)
Party Name Accounting Society	Sales Rep Amanda Tapia	Theme	Category

Venue

Description	Type	Start	End	Banquet Room	Setup Style
Setup/Pickup		5:30 pm	5:45 pm	Student Union	Delivery

Food & Beverage

Food/Service Items	Unit	Price	Total
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Delivery to LA ROOM A for
5:45pm

(1) Special Menu	Each	185.00	185.00
(40) Disposables	Each		
(2) Assorted Tea Sandwiches	Dozen(s)		
(3) BBQ Meatballs	Dozen(s)		
(2) Spanakopita	Dozen(s)		
(2) Beef Taquitos	Dozen(s)		
(2) Fresh-Brewed Iced Tea (Unsweetened)	Gallon(s)		

Water Service

	Food	Beverage	Liquor	Equipment	Labor	Room	Other	Total
Subtotal	185.00	0.00	0.00	0.00	0.00	0.00	0.00	185.00
Service Charge	31.45	0.00	0.00	0.00	0.00	0.00	0.00	31.45
Taxes	20.56	0.00	0.00	0.00	0.00	0.00	0.00	20.56
Total	237.01	0.00	0.00	0.00	0.00	0.00	0.00	237.01

Subtotal	185.00	Paid	0.00
Tax	20.56	Balance	237.01
Service Charge	31.45		
Total Value	237.01		

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.

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



Accounting Society

Professional Event

RESUME WORKSHOP: PART I **Resumes for Beginners**

Don't have resume?

Come stop by and we'll get you started!
If you already have one, bring 3-5 copies
of your resume to get professional feedback!

FOOD AND REFRESHMENTS PROVIDED

Friday February 23, 2018

Location: USU Los Angeles Room A

6:00 PM - 9:00 PM



@AS.CSULA



Accounting Society CSULA



ASSOCIATED STUDENTS, INC.

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



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