



Associated Students, Inc. Leadership Funding Conference Application and Guidelines 2017-2018

ASI Mission Statement

ASI serves, engages, and empowers students

ASI Leadership Funding

ASI provides leadership funding for student organizations' events and individual student attendance at professional conferences. The ASI Executive Vice President and professional staff members determine the allocation of these funds.

ASI has allocated approximately \$30,000 to ALF. Approved funding is based on eligibility per the ALF Guidelines and Instructions. Awarded funds are on a first come, first served basis. **Application due PRIOR to conference attendance.** The funding is available for conferences held between July 1, 2017 and May 26, 2018. We will not fund any conferences after May 26, 2018. Proof of attendance for this conference must be presented no later than **June 9, 2018**.

The applicant will receive an email noting the decision of their application. If approved, recipients are required to submit proof of attendance and a written statement to the ASI office in USU 3700 in order to process payment for their awarded funds.

<u>Due Dates</u> Applications must be submitted to USU 3700 no later than 12:00 noon on any date <u>prior to the conference date</u>:
Friday, July 7, 2017 at Noon
Friday, August 11, 2017 at Noon
Friday – September 8, 2017 at Noon
Friday – October 6, 2017 at Noon
Friday – November 3, 2017 at Noon
Friday – December 1, 2017 at Noon
Friday – February 2, 2018 at Noon
Friday – March 2, 2018 at Noon
Friday – April 6, 2018 at Noon
Friday- May 4, 2018 at Noon

Provisions of California Assembly Bill No. 1887

Effective September 27, 2016, California Assembly Bill No. 1887 prohibits ASI from approving a request for ASI-funded or ASI-sponsored travel to any state that, after June 26, 2015, has enacted a law that:

- Voids or repeals or has the effect of voiding or repealing, existing state or local protections against discrimination on the basis of sexual orientation, gender identity, or gender expression; or
- Has enacted a law that authorizes or reflects discrimination against same-sex couples or their families, or on the basis of sexual orientation, gender identity, gender expression, as specified, subject to certain exceptions.

This prohibition currently extends to the following states: Alabama, Kansas, Kentucky, Mississippi, North Carolina, South Dakota, Tennessee, and Texas. This list may be subject to change



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ALF Conference Guidelines

Funding paid as follows:

- ❖ One day in-state conference **within 400 miles from campus:** \$100.00 award
 - ❖ Two days or more conference within **400 miles from campus:** \$250.00 award
 - ❖ One day conference **outside of 400 miles from campus:** \$200.00 award
 - ❖ Two days or more conference **outside of 400 miles from campus:** \$425.00 award
-
- Applicant must be a currently enrolled CSUSM student
 - Conference must follow all guidelines outlined in this packet
 - No more than three students attending the same conference may obtain ALF funds.
 - International conferences will not be funded.
 - Funding will only be granted to an individual to attend a conference once per semester.
 - Student will receive funds upon submit of proof of attendance and written statement.
 - You can only receive funding for the same conference one time within two consecutive academic years.
 - Club sports teams and other student recreation sports may only apply if the individual or team is participating in a national title championship.
 - Incomplete applications will be denied, at the discretion of the ASI Executive Vice President.

Instructions for application:

1. Complete all forms in this packet.
2. **Attach a copy of the advertised conference**, which must include title, subject, location and dates. Conference subject must fit the mission statement of ASI.
3. Attach an original typed statement with the following content: explain the conference, why you would like to go, why you should be awarded funding, what you hope to gain from your attendance, and any goals or specific outcomes you would like to achieve at the conference. Please give specific examples of how this conference will benefit you professionally or personally. **Each statement must be a minimum of a full one page, double spaced.** Only original applications are accepted; photocopies or attachments to emails are not accepted.
4. Return completed packet to USU 3700 by due date. **APPLY EARLY.**
5. **In order to receive your awarded funds**, proof of attendance (name badge, agenda, etc.) must be provided, along with a typed statement about the conference. Describe how the conference was beneficial to your personal and/or professional development and any skills or insights you gained. Please submit photos of the conference if you took any. Your photos and written statement may be used on the ASI website for promotional material.



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Application Form

Today's Date									
Your name				Student ID #					
Address			City			State		ZIP	
Campus Email					Phone				
First day attending Conference:	At:		am/pm	Last day attending Conference:	At:		am/pm		
Name of Conference									
Complete address of Conference									
<p>• Circle One:</p> <p>❖ One day conference within 400 miles from campus: \$100.00 ❖ One day conference outside of 400 miles from campus: \$200.00</p> <p>❖ Two days or more conference within 400 miles from campus: \$250.00 ❖ Two days or more \ conference outside of 400 miles from campus: \$425.00</p>									
<p>I hereby certify that I am a currently enrolled student at California State University San Marcos. I agree that within ten (10) business days of my return from the conference, I will submit it to USU 3700 proof of my attendance at the conference and a statement.</p>									
Your Signature									
Print your name							Date		

FOR ASI USE ONLY

Approved Amount			
ASI Executive Vice President			Date
Government Affairs Coordinator			Date



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RELEASE OF LIABILITY, PROMISE NOT TO SUE, ASSUMPTION OF RISK AND AGREEMENT TO PAY CLAIMS

Activity: _____

Activity Date(s) and Time(s): _____

Activity Location(s): _____

In consideration for being allowed to participate in this Activity, on behalf of myself and my next of kin, heirs and representatives, I **release from all liability and promise not to sue** the State of California, the Trustees of The California State University, California State University San Marcos, Associated Students Inc., University Auxiliary & Research Services Corporation (UARSC), and their employees, officers, directors, volunteers and agents (collectively "University") from any and all claims, **including claims of the University's negligence**, resulting in any physical or psychological injury (including paralysis and death), illness, damages, or economic or emotional loss I may suffer because of my participation in this Activity, including conference to, from and during the Activity.

I am voluntarily participating in this Activity. I am aware of the risks associated with traveling to/from and participating in this Activity, which include but are not limited to physical or psychological injury, pain, suffering, illness, disfigurement, temporary or permanent disability (including paralysis), economic or emotional loss, and/or death. I understand that these injuries or outcomes may arise from my own or other's actions, inaction, or negligence; conditions related to conference; or the condition of the Activity location(s). **Nonetheless, I assume all related risks, both known or unknown to me, of my participation in this Activity, including conference to, from and during the Activity.**

I agree to **hold** the University, Associated Students Inc. and UARSC **harmless** from any and all claims, including attorney's fees or damage to my personal property that may occur as a result of my participation in this Activity, including conference to, from and during the Activity. If the University, Associated Students Inc. or UARSC incur any of these types of expenses, I agree to reimburse the University, Associated Students Inc. or UARSC. If I need medical treatment, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

I am 18 years or older. **I understand the legal consequences of signing this document, including (a) releasing the University, Associated Students Inc. and UARSC from all liability, (b) promising not to sue the University, Associated Students Inc. or UARSC, (c) and assuming all risks of participating in this Activity, including conference to, from and during the Activity.**

I understand that this document is written to be as broad and inclusive as legally permitted by the State of California. I agree that if any portion is held invalid or unenforceable, I will continue to be bound by the remaining terms.

I have read this document, and I am signing it freely. No other representations concerning the legal effect of this document have been made to me.

Participant Signature: _____ Participant Name (print): _____ Date: _____

Emergency Contact (print): _____ Phone: _____

If Participant is under 18 years of age:

I am the parent or legal guardian of the Participant. **I understand the legal consequences of signing this document, including (a) releasing the University, Associated Students Inc. and UARSC from all liability on my and the Participant's behalf, (b) promising not to sue on my and the Participant's behalf, (c) and assuming all risks of the Participant's participation in this Activity, including conference to, from and during the Activity.** I allow Participant to participate in this Activity. I understand that I am responsible for the obligations and acts of Participant as described in this document. I agree to be bound by the terms of this document.

I have read this document, and I am signing it freely. No other representations concerning the legal effect of this document have been made to me.

Signature of Minor Participant's Parent/Guardian

Name of Minor Participant's Parent/Guardian (print)

Date



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STUDENT CONDUCT AGREEMENT

Event/Activity: _____

Event Date: _____

Student Name: _____ Student ID: _____

In consideration for my participation in the event/activity identified above, I or my parent or legal guardian on my behalf (student under 18 years of age), hereby agree to the following conditions:

General Notice

I acknowledge that as a student of Cal State San Marcos, I am representing the organization sponsoring my participation in the above event/activity and the student body of my campus and the California State University (CSU) system. As a responsible individual of the CSU community, I understand that I am expected to conduct myself in a manner consistent with the rules and regulations of my campus, the hosting organization, the CSU, and all applicable state and federal laws. I also understand that any violation of these rules, regulations or laws may result in my expulsion from the event/activity and further disciplinary action by Cal State San Marcos.

If I am expelled from the event/activity, Cal State San Marcos shall not be held responsible for any financial loss I may incur, including but not limited to those incurred as a result of paid registration fees, conference expenses, legal expenses, personal damages, or other expenses related to my participation in this event/activity and my violation of this Student Conduct Agreement.

By signing this form, I further agree that I will not participate in the following activities:

- Use, possession, or distribution of alcohol while at this event/activity and/or use, possession of alcohol by any underage individual.
- Use, possession, or distribution of any illegal or illicit drug.
- Sexual assault or indecent exposure. Sexual assault is defined as the implied use or threatened use of force to engage in any sexual activity against another person's will.
- Behavior which threatens the emotional or physical well-being and/or safety of participants including but not limited to any form of fighting.
- Unauthorized use of any fire safety equipment, including the activation of alarms or extinguishers without immediate cause.
- Possession of any weapons, dangerous or explosive devices or chemicals.

Process

Alleged violations will be reviewed by the appropriate CSUSM faculty/staff supervisor for determination of the need for disciplinary action upon return to campus.

By signing below, I acknowledge that I have read, understood, and agree to abide by these student conduct guidelines.

Signature of Student Participant / Date

Printed Name

Signature of Parent/Guardian If Student Is Under 18 Years of Age / Date

Printed Name



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ONLY COMPLETE THIS PAGE IF YOU WILL BE TRAVELING BY AIRPLANE

RELEASE AND HOLD-HARMLESS STATEMENT

I, _____, am a student at California State University San Marcos, one of the campuses of the California State University (CSU).

I am/will be participating in a CSU-affiliated program which requires air travel. (CSU-affiliated program includes any program offered by, or pursuant to a program of, the California State University, any campus of the California State University, any student body organization, or any organization affiliated with any such organization or with any combination thereof.) My participation in this program is voluntary.

I have been informed, and I know, that 1) air travel involves risks which can result in damage to property, injury to persons, and death; and 2) the CSU assumes no liability for damage, injury, or death occurring on such travel. With this knowledge and information, I agree to participate in the program, and the air travel, at my own risk.

I release and hold harmless the state of California, the California State University, California State University San Marcos, and each and every officer, employee and agent of each of them, from any and all claims and causes of action that I may have against any of these institutions or persons, by reason of any accident, illness, injury, death, or other consequences resulting directly or indirectly from or in any manner arising out of, or in connection with, my being a passenger on an airplane pursuant to my participation in the CSU-affiliated program.

This release and hold-harmless shall also be binding on my heirs, assigns, successors, and all other persons who may claim through me.

Date: _____

Signature: _____

Print Name: _____

Street Address: _____

City, State, Zip Code: _____