Form A

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| --- | --- |
| http://www.sjc.edu.hk/download/badge_bw_400x456.jpg | St. Joseph's College  Extra-curricular Activities Committee  Application for organizing internal ECA |

**Part I: Details of Function**

|  |  |
| --- | --- |
| Title: |  |
| Organizing Body: |  |
| Date / Period: |  |
| Time: |  |

**Part II: Booking of Equipment / Facilities**

|  |  |  |
| --- | --- | --- |
|  | Remarks | Approved and signed by |
| Room/ Hall: |  |  |
| Microphones: |  |  |
| Video Equipment: |  |  |
| Others: |  |  |

**Part III: OLE/ English proofreading (if necessary)**

|  |  |  |
| --- | --- | --- |
|  | Remarks | Approved and signed by |
| OLE Hours: |  | Suen Rani |
| English Proofreading\*: |  | Lam K H  (Academic and Service Groups)  Thomas Anthony  (Sports and Interest Groups) |

\**For documents to outsiders only*.

**Part IV: Approval by ECA Committees**

|  |  |
| --- | --- |
| Approved by: | Reference No.: |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Date: )  Yeung Rani  ECA Secretary | Additional Remarks: |
|  |  |
| Final Approved by: |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Date: )  Tam C Y  ECA Master |  |

***This document will be scanned before returning to:***

|  |  |  |
| --- | --- | --- |
| Student Name: | Class: S | No.: |

|  |  |
| --- | --- |
| http://www.sjc.edu.hk/download/badge_bw_400x456.jpg | St. Joseph's College  [Type your club name]  Year 2017-18 (Internal Event) |

Proposal for Organizing a [Type the event]

1. **Basic Information**

|  |  |
| --- | --- |
| Aims: | [To enhance members’ knowledge in ….. (Or any other relevant reasons)] |
| Target Group: | [e.g. S1 to S3 (a maximum of 30 students)] |
| Date: | [e.g. May 5, 2017 (Fri)] |
| Time: | [e.g. 10:00 a.m. to 12:00 noon] |
| Fees charged: | [e.g. Members- free of charge; non-members- $5 each] |
| Time and Place for Assembly: | [e.g. 9:00 a.m. at School Main Entrance] |
| Time and Place for Dismissal: |  |

|  |  |
| --- | --- |
| Teacher(s) Present | Signature |
|  |  |
|  |  |

1. **Description of the event**

All participants will first gather at the Main Entrance of St. Joseph's College on the date of event. The teacher(s) involved will then lead the students to ….

Participants will be divided into groups with a maximum of 10 for each. Each group will take turn to ….

Teacher(s) in charge will ensure ….

The event will end at 12:00 noon. The teacher(s) involved will dismiss the students at …

*[Give a detailed description of the event including:]*

* *The Rundown of the Event / What you are going to do*
* *The Roles played by the Participants*
* *The Roles played by the Teacher(s) involved*

1. **Budget**

|  |  |  |  |
| --- | --- | --- | --- |
| Item | Income | Expenses | Balance |
| Fees collected from non-member 8 x $ 5 | $ 40.00 |  |  |
|  |  |  |  |
|  |  |  |  |

*The Budget should give an estimate on the Income and Expenses of the event. Charges should be “reasonable”. Surplus is allowed (however, not excessive) and the Budget need not be “Balanced” all the time. Spend WISELY and avoid wastage!*

1. **Bad Weather Arrangement**

If amber (or above) rainstorm signal and / or typhoon signal number 3 (or above) is hoisted 3 hours before the event, the event will be postponed to a later date with further notice.

***This is a MUST.***

1. **Parental Consent**

A parental consent will be distributed to the boy a week in advance.

***This is necessary. Proofreading by Ms. Pak is required before submitting to ECA secretary.***

1. **Photography**

Chan XX (S5E no. 3) and Cheung YY (S5A no. 8) will be the photographers for the event.

1. **Duty Roster** (*if necessary*)

|  |  |  |  |
| --- | --- | --- | --- |
| Time | May 5 (Fri) |  |  |
| 9:45-10:30 | Chan XX (S5C no. 4) |  |  |
| 10:30-12:00 | Ho YY (S5B no. 8) |  |  |
|  |  |  |  |

1. **Emergency Plan** (*it is required for outdoor activities*)

First aid kits and personal communication devices (such as mobile phones, etc.) are required for casualty handling and communication in the event of an emergency.

1. **Evaluation**

The committee will use the official evaluation form for evaluation. The form will be filled in and return to the ECA Secretary Ms. Rani Yeung within one week after the event.

***This is necessary for us to collect feedback so that we can pass on this information to later generations.***

Signed by,

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  [Student Name][Class][No.]  Student-in-Charge | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  [Teacher Name]  Teacher-in-Charge |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Yeung Rani  ECA Secretary | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Tam C Y  ECA Master |