



OFF CAMPUS TRIPS/EVENTS

Today's Date: ___/___/___ Date of Event: ___/___/___

Club Sponsoring the Event: _____

AAC Representative: _____

Name of Event: _____

Event Contact Person: _____

Phone: _____

E-mail: _____

Who should the check be made out to? _____

Is the check being made out to a student, professor, SA non-funded account, or other? _____

If student or professor, please include:

Permanent address: _____

Expected Attendance: ___ Total Cost of Event: \$ _____ Amount Requesting: \$ _____

Is there an admission charge? ___ If so, how much would it be before AAC funding? \$ _____
After? \$ _____

MAKE SURE YOU INCLUDE:

- a) **Typed and detailed rationale, see instructions below**
- b) **Breakdown of Costs**
- c) **Copy of flyer or other advertisement**

How is the remainder of your event being funded?

List any other allocations the AAC has made to your organization this year:

For the use of AAC only
Received:

Reading Number:

Approved to the Agenda:

For the use of AAC only
Did you remember?
___ Rationale
___ Copy of flyer
___ Breakdown of costs

How have you made this event open to all majors?

Reading Presenter: _____

Phone: _____ E-mail: _____

Name of Event: _____

Location: _____

Date of Departure: ___/___/___

Date of Return: ___/___/___

Number of Days: _____

Number of Nights: _____ (if overnight)

of People Attending: _____

Please list the names, class year and academic major of each person attending the trip in your rationale

PART A. BREAKDOWN OF ANTICIPATED TOTAL COSTS:

Please list all expenses anticipated for the trip including travel, lodging, food, registration fees, supplies, etc. **Include a breakdown of prices in the rationale. BE EXACT AS YOU CAN!**

PART B. FUNDING LIMITS FOR EXPENSE CATEGORIES:

For events that involve travel, food, and lodging, the following funding limits must be followed:

1. **Transportation** (fill out only the section that applies to your request)

A. Personal Auto: Total amount of tolls (if applicable) = \$ _____

$$\frac{\text{_____}}{\# \text{ of miles}} \times \frac{\text{_____}}{\$/\text{mile}} \times \frac{\text{_____}}{\# \text{ of cars}} = \$ \text{_____}$$

B. Renting a Vehicle: Total amount of tolls (if applicable) = \$ _____

$$\frac{\text{_____}}{\# \text{ of miles}} \times \frac{\text{_____}}{\$/\text{mile}} \times \frac{\text{_____}}{\# \text{ of cars}} = \$ \text{_____}$$

***Maximum is \$55 per car, per way**

***\$/mile is 75% of current State rate**

Contact your AAC representative or the Chair of AAC, saaac@geneseo.edu, if you have any questions or concerns.

C. Other (plane, bus, state vehicle etc.)

Please list costs: _____

***Maximum is \$55 per person, per way**

Maximum amount for Transportation (sum of Part A, B, and C) \$ _____

2. **Lodging (Only if overnight trip)**

_____ X _____ X _____ = \$ _____
of people # of nights (up to 2) Amount per night (*maximum of \$50 person/night*)

*If staying out of state, include taxes (or a refund cannot be made) \$ _____

Maximum amount for lodging (sum of above) \$ _____

3. **Meals** (fill out only those sections that apply to your request)

A. Breakfast (if leaving before 8:00 A.M.)

_____ X _____ X \$7.00 = \$ _____
(*Maximum of 3*) # of people

B. Lunch

_____ X _____ X \$9.00 = \$ _____
(*Maximum of 3*) # of people

C. Dinner (if returning after 6:00 P.M.)

_____ X _____ X \$15.00 = \$ _____
(*Maximum of 3*) # of people

Maximum amount for meals (sum of parts A, B, and C) \$ _____

4. **Additional Costs**

Please list any additional costs *Note: AAC may only pay for 1/2 of registration costs

Maximum amount for additional costs (as totaled from above list) \$ _____

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