



Easy Button for Student Club Forms

For more information, please contact:

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Coordinator of Student Organizations and
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970-339-6259

College Center 130

Our club has BIG PLANS!

What do we need to do to ...?

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Reserve a Room

We need a room for our meetings.

Meeting and activity rooms should be scheduled early. Two weeks in advance is preferred, but much earlier notice is recommended due to availability. For regular meetings an Activity Request Form is not necessary, but is necessary for an event or tabling. Scheduling rooms must be made by the organization advisor.

Spaces Available:

Contact:

EDBH: Theater, classrooms, tabling,	Advisors only call Patti Campbell, 970-339-6252, patti.campbell@aims.edu
Westview:	Lindsey Oster, 970-339-6387, lindsey.oster@aims.edu Kathy Lee, 970-339-6244, kathy.lee@aims.edu
Allied Health:	Lindsey Oster, 970-339-6387, Lindsey.oster@aims.edu
Gym:	Laura Willoughby, 970-339-6295, laura.willoughby@aims.edu

For set-up and removal of tables, chairs, podiums, microphones, screen, etc., please have the club advisor fill out a [Service Request for Facilities and Operations](#). Please make sure the date, time of set-up and removal, location, contact information, and requirements are clearly listed. Make sure a confirmation on the room is received and a copy is kept for your records. In case of a cancellation, contact the room scheduler.



Advertising

Our club wants to make posters and fliers to advertise our meetings.

Our club wants to advertise our upcoming event.

1. Submit:

- Graphics Request Form signed by advisor at least 2 weeks prior to the event to Patty Miller, patty.miller@aims.edu, Student Life Office, CC131.

Graphic Technologist, Patty Miller, is available to assist with posters, fliers, bookmarks, business cards, etc. Clubs will only be charged for materials. Aims Reprographics is available for large orders of fliers and posters. For more information, contact Aims Reprographics at 970-339-6272.

Our club wants to put a blurb in the Weekly and/or Daily.

1. Email your blurb to the Coordinator of Student Organizations and Activities

***All advertising must be approved by the Coordinator of Student Organizations and Activities**

Reference - Student Organization Handbook

☐ SGA

GRAPHIC REQUEST FORM

☐ SPC

Date: _____

☐ MyLife

Club or Organization: _____

Event Name/Theme: _____

Date: _____ Additional Details: _____

Time: _____

Location: _____

Media Requested: _____ Quantity: _____

☐ Posters (11" x 17") _____

Event Survey Outcome Statement: _____

☐ Flyers (8.5" x 11") _____

☐ Flyers (5.5" x 8.5") _____

☐ Business Cards _____

☐ Table Tents _____

(Event Survey for ASACC only.)

☐ Bookmarks _____

Materials Needed By: _____

☐ Other _____

* Please put any additional info. on back.

Submitted by: _____ Position: _____

Authorized Signature of Advisor: _____

Account Number: _____

(Account number required for Student Clubs only. Clubs will be charged a fee for materials.)



Purchase with the “P” Card

Our club wants to buy candy and a temporary cardboard display board for the Student Involvement Fair. Our club wants to order pizza for our end of year celebration.

1. Check club finances
2. Submit two weeks before the event:
 - Official Function Form
 - Procurement Card Checkout Sheet
 - Preauthorized Event Expenditure Form
3. **Aims does not pay tax. Aims is TAX EXEMPT.**
4. Return original receipt and Procurement Card to the Student Life Office that same day
5. Make sure items buying are approved for the “P” card:

NO-NOs – CANNOT PURCHASE:

- ALL Food – (only food supplies for events)
- Restaurant meals & tips
- Alcohol
- Services (labor)
- Computers/computer hardware/computer software/printers
- Travel & entertainment
- Personal purchases
- Cash advances
- Promotional items (Aims mugs, Aims baseball hats, etc.)
- Hazardous materials (fuel, propane, helium, etc.)
- Clothing/uniforms
- Furniture/appliances/household items
- Toiletries
- Non-office supply items purchased from Bookstore-books are approved purchases
- Vehicle expenses (service stations transactions, auto parts, repairs)
- Travel and travel related expenses (airfare, vehicle rental, meals, lodging)
- Gift cards
- Greeting Cards
- Gifts/Prizes over \$25
- Contracts
- Membership dues and fees
- Subscriptions
- Registrations
- Postage or shipping charges – UPS/FedEX/DHL.USPS

LIMITS ON CARD:

5 transactions / day
15 transactions / month
\$5000 / month
\$1000 maximum per transaction

DO NOT PURCHASE GOODS FROM THE FOLLOWING TYPE OF MERCHANT

- Banks, ATMs, financial institutions
- Travel related merchants – airlines, auto rental, hotels, motels, travel agencies
- Automotive and transportation related merchants – railroads, bus lines, taxi, cruise line, auto dealers, rental, sales service
- Eating places – restaurants, bars, cocktail lounges, nightclubs, fast food restaurants
- Betting, lottery, wagers, beer, wine, packaged liquor stores

OFFICIAL FUNCTIONS REQUEST FORM

This form is used to pre-approve the Official Function activity.

Date of Function:

Location of Function:

Title & Description of Function (i.e., award ceremony, reception, etc.):

Purpose of Function:

Number of Attendees Expected:

Names/Titles of Individuals Attending:

College Personnel (group or individual)	Guests (group or individual)

Aims Club Advisor's
Signature:

Phone #:

Department:

For Office Use Only:

To the best of my knowledge, this function complies with Aims Community College's Official Functions procedures.

Administrator's Signature

Date

Senior Management Signature

Date

President's Signature* Date

President's signature is required when a senior management team member is the requestor or when the requestor is asking for an exception to the official functions procedures. **Use requisition or LPO for payment (attach approved Official Functions Request form and itemized receipts).*

Procurement Card Checkout Sheet

Student Organizations

Remember all items must be tax exempt – the number is at the bottom of the card! Return the card the same day as checkout with the original receipt to the Student Life Office.

NO-NOs – CANNOT PURCHASE:

- ALL Food – (only food supplies for events)
- Restaurant meals & tips
- Alcohol
- Services (labor)
- Computers/computer hardware/computer software/printers
- Travel & entertainment
- Personal purchases
- Cash advances
- Promotional items (Aims mugs, Aims baseball hats, etc.)
- Hazardous materials (fuel, propane, helium, etc.)
- Clothing/uniforms
- Furniture/appliances/household items
- Toiletries
- Non-office supply items purchased from Bookstore-books are approved purchases
- Vehicle expenses (service stations transactions, auto parts, repairs)
- Travel and travel related expenses (airfare, vehicle rental, meals, lodging)
- Gift cards
- Greeting Cards
- Gifts/Prizes over \$25
- Contracts
- Membership dues and fees
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- Postage or shipping charges – UPS/FedEX/DHL.USPS

LIMITS ON CARD:

5 transactions / day
15 transactions / month
\$5000 / month
\$1000 maximum per transaction

DO NOT PURCHASE GOODS FROM THE FOLLOWING TYPE OF MERCHANT

- Banks, ATMs, financial institutions
- Travel related merchants – airlines, auto rental, hotels, motels, travel agencies
- Automotive and transportation related merchants – railroads, bus lines, taxi, cruise line, auto dealers, rental, sales service
- Eating places – restaurants, bars, cocktail lounges, nightclubs, fast food restaurants
- Betting, lottery, wagers, beer, wine, packaged liquor stores
- Dating & escort services, counseling, massage parlors, health & beauty spas, computer dating

I have read and understand the credit card rules. I will return the credit card immediately after use (or at agreed upon time) with all original receipts. I understand that if I use the card for prohibited items or do not return the card with original receipts, I will be personally responsible to pay the money back. If I lose the credit card, I will call Linda Stone (339-6450) immediately.

Program/Organization _____ Approx. amount to be spent _____

Signed _____ Date _____ Date needing P-card _____

Advisor approval signature _____ Cost Code/s _____

Activity or Event _____ Purchase Made at _____

OFFICE USE:

Date card signed out _____ Date card returned _____

Card # _____

Receipts returned? _____ Amount spent _____

It is highly recommended that you call ahead to reserve the card, the card may already be checked out to another student organization.

Preauthorized Event Expenditure Form

Student Organizations

(Submit at least 2 weeks prior to event)

Date Submitted: _____

Organization Name: _____

Event Name: _____ Date of Event: _____

Forms Picked Up By: _____

Forms Needed (Req., Check Req. or P-CARD) Estimated Amount Vendor

Approved By: _____
Organization Advisor

Date: _____

Student Life Staff

Date: _____

Organization Officer

Date: _____

Office Use Only:

Approved: _____

Date: _____

Current Balance: _____

Date: _____



Purchase with a Purchase Order

Our club wants to buy t-shirts to sell. Our order will be over \$1000.

*Clothing may not be purchased using the Procurement Card, “P” Card.

1. Check club finances
2. Determine sizes needed, style, etc.
3. Submit:
 - Official Function Form
 - Preauthorized Event Expenditure Form
4. **Purchase Order (Requisition)-**
 - **Must use a requisition with purchases over \$1000**
 - Check with the vendor to make sure they accept a purchase order from Aims (might try Victory Sales, 970-351-0131)
 - ***No ordering can be completed before a purchase order number is assigned by Aims.** It takes at least two weeks to get purchase order number.
 - Contact the vendor and get a quote with cost of product, shipping, handling, set-up charge, etc.
 - A Requisition form can be picked up in the Student Life Office
 - Submit:
 - Requisition form completed with club’s expense code. **Club Advisor and the Director of Student Life must sign.**
 - Notify the Student Life Office when product is delivered for release of payment.

OFFICIAL FUNCTIONS REQUEST FORM

This form is used to pre-approve the Official Function activity.

Date of Function:

Location of Function:

Title & Description of Function (*i.e., award ceremony, reception, etc.*):

Purpose of Function:

Number of Attendees Expected:

Names/Titles of Individuals Attending:

College Personnel (<i>group or individual</i>)	Guests (<i>group or individual</i>)

Aims Club Advisor's
Signature:

Phone #:

Department:

For Office Use Only:

To the best of my knowledge, this function complies with Aims Community College's Official Functions procedures.

Administrator's Signature

Date

Senior Management Signature

Date

President's Signature* Date

President's signature is required when a senior management team member is the requestor or when the requestor is asking for an exception to the official functions procedures. **Use requisition or LPO for payment (attach approved Official Functions Request form and itemized receipts).*

Preauthorized Event Expenditure Form

Student Organizations

(Submit at least 2 weeks prior to event)

Date Submitted: _____

Organization Name: _____

Event Name: _____ Date of Event: _____

Forms Picked Up By: _____

Forms Needed (Req., Check Req. or P-CARD)

Estimated Amount

Vendor

Approved By: _____

Date: _____

Organization Advisor

Date: _____

Organization Officer

Date: _____

Student Life Office

Office Use Only:

Approved: _____

Date: _____

Current Balance: _____

Date: _____



Participate in a Co-sponsored Event

Our club wants to participate in a co-sponsored event with the MyLife Student Peer Education Council, "Get High Naturally."

1. Contact the coordinator of the event from MyLife, SPC, or SGA.
2. Submit:
 - Official Function Form – if your own event at least 2 weeks prior to the event
 - Activity Request Form at least 2 weeks prior to the event
3. Follow the required activities set forth by the MyLife Student Peer Education Council
4. Keep a roster of all club members participating in the event
5. Submit:
 - Off-Campus Community Service/Co-Sponsorship Report
 - Roster

***Clubs may ask ASACC for help with their own event as a co-sponsored event.**

OFFICIAL FUNCTIONS REQUEST FORM

This form is used to pre-approve the Official Function activity.

Date of Function: _____

Location of Function: _____

Title & Description of Function (i.e., award ceremony, reception, etc.):

Purpose of Function:

Number of Attendees Expected:

Names/Titles of Individuals Attending:

College Personnel (group or individual)	Guests (group or individual)

Aims Club Advisor's
Signature: _____

Phone #: _____

Department: _____

For Office Use Only:

To the best of my knowledge, this function complies with Aims Community College's Official Functions procedures.

Administrator's Signature

Date

Senior Management Signature

Date

President's Signature* Date

President's signature is required when a senior management team member is the requestor or when the requestor is asking for an exception to the official functions procedures. **Use requisition or LPO for payment (attach approved Official Functions Request form and itemized receipts).*

Activity/Event Request Form

Student Organizations

(Submit at least 2 weeks prior to event
6 weeks prior to event for off-campus activities)

Student Organization: _____ Date: _____

Please mark those that would apply:

- ☐ **Off-Campus Community Service Project**
- ☐ **ASACC Co-Sponsorship Event**
- ☐ **Club Event Request**

Description of Activity/Event:

Location of Activity: _____

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

Members Anticipated to Participate: _____

Organization Hosting Event: _____

Hosting Organization Contact Person: _____

Forms Accompanying Activity/Event Request Form:

- | | |
|--|---|
| <input type="checkbox"/> Official Function Form | <input type="checkbox"/> Advisor Travel Request |
| <input type="checkbox"/> Procurement Card Checkout Sheet | <input type="checkbox"/> Pre/Post Conference Forms |
| <input type="checkbox"/> Preauthorized Event Expenditure Form | <input type="checkbox"/> Student Travel Agreement |
| <input type="checkbox"/> Community Service Project Report | <input type="checkbox"/> Deposit Form |

Advisor's Signature Approval: _____

President's Signature Approval: _____

Approved: _____ Disapproved: _____ Date: _____

Coordinator of Student Organizations and Activities: _____

Off-Campus Community Service Project Report/ Co-Sponsorship Project Report Student Organizations

Student Organization: _____

Advisor: _____

Description of Off-Campus Community Service Project or Co-Sponsored Event:

Date(s) and Time(s): _____

Location: _____

If this is a community service project, how has the community benefited from the organization's participation in the off-campus community service project?

Co-Sponsored Event Organization: _____

Contact person for verification: _____ Phone # or email: _____

Number of Members Participated: _____

****Attach a roster of participating club members**

Advisor's Signature: _____

President's Signature: _____

Approved: _____ Disapproved: _____ Date: _____

Coordinator of Student Organizations and Activities: _____



Participate in the Aims Volunteer Project

Our club wants to participate in an Aims Volunteer Project.

1. Submit:
 - Activity Request Form at least 2 weeks prior to the event
2. Follow the required activities set forth by the Student Government Association/Aims Volunteer Project Coordinator
3. Sign-in at the event.
4. Keep a roster of all club members participating in the event

Activity/Event Request Form

Student Organizations

(Submit at least 2 weeks prior to event
6 weeks prior to event for off-campus activities)

Student Organization: _____ Date: _____

Please mark those that would apply:

- ☐ **Off-Campus Community Service Project**
- ☐ **ASACC Co-Sponsorship Event**
- ☐ **Club Event Request**

Description of Activity/Event:

Location of Activity: _____

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

Members Anticipated to Participate: _____

Organization Hosting Event: _____

Hosting Organization Contact Person: _____

Forms Accompanying Activity/Event Request Form:

- | | |
|--|---|
| <input type="checkbox"/> Official Function Form | <input type="checkbox"/> Advisor Travel Request |
| <input type="checkbox"/> Procurement Card Checkout Sheet | <input type="checkbox"/> Pre/Post Conference Forms |
| <input type="checkbox"/> Preauthorized Event Expenditure Form | <input type="checkbox"/> Student Travel Agreement |
| <input type="checkbox"/> Community Service Project Report | <input type="checkbox"/> Deposit Form |

Advisor's Signature Approval: _____

President's Signature Approval: _____

Approved: _____ Disapproved: _____ Date: _____

Coordinator of Student Organizations and Activities: _____



Participate in an Off-campus Community Service Project

Our club wants to do our own community service project by helping Habitat for Humanity.

1. Submit:
 - Official Function Form at least 2 weeks prior to the event
 - Activity Request Form at least 2 weeks prior to the event
2. Keep a roster of all club members participating in the event
3. Submit after the event:
 - Off-Campus Community Service/Co-Sponsorship Report
 - Roster

OFFICIAL FUNCTIONS REQUEST FORM

This form is used to pre-approve the Official Function activity.

Date of Function: _____

Location of Function: _____

Title & Description of Function (i.e., award ceremony, reception, etc.):

Purpose of Function:

Number of Attendees Expected:

Names/Titles of Individuals Attending:

College Personnel (group or individual)	Guests (group or individual)

Aims Club Advisor's
Signature: _____

Phone #: _____

Department: _____

For Office Use Only:

To the best of my knowledge, this function complies with Aims Community College's Official Functions procedures.

Administrator's Signature

Date

Senior Management Signature

Date

President's Signature* Date

President's signature is required when a senior management team member is the requestor or when the requestor is asking for an exception to the official functions procedures. **Use requisition or LPO for payment (attach approved Official Functions Request form and itemized receipts).*

Activity/Event Request Form

Student Organizations

(Submit at least 2 weeks prior to event
6 weeks prior to event for off-campus activities)

Student Organization: _____ Date: _____

Please mark those that would apply:

- ☐ **Off-Campus Community Service Project**
- ☐ **ASACC Co-Sponsorship Event**
- ☐ **Club Event Request**

Description of Activity/Event:

Location of Activity: _____

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

Members Anticipated to Participate: _____

Organization Hosting Event: _____

Hosting Organization Contact Person: _____

Forms Accompanying Activity/Event Request Form:

- | | |
|--|---|
| <input type="checkbox"/> Official Function Form | <input type="checkbox"/> Advisor Travel Request |
| <input type="checkbox"/> Procurement Card Checkout Sheet | <input type="checkbox"/> Pre/Post Conference Forms |
| <input type="checkbox"/> Preauthorized Event Expenditure Form | <input type="checkbox"/> Student Travel Agreement |
| <input type="checkbox"/> Community Service Project Report | <input type="checkbox"/> Deposit Form |

Advisor's Signature Approval: _____

President's Signature Approval: _____

Approved: _____ Disapproved: _____ Date: _____

Coordinator of Student Organizations and Activities: _____

Off-Campus Community Service Project Report/ Co-Sponsorship Project Report Student Organizations

Student Organization: _____

Advisor: _____

Description of Off-Campus Community Service Project or Co-Sponsored Event:

Date(s) and Time(s): _____

Location: _____

If this is a community service project, how has the community benefited from the organization's participation in the off-campus community service project?

Co-Sponsored Event Organization: _____

Contact person for verification: _____ Phone # or email: _____

Number of Members Participated: _____

****Attach a roster of participating club members**

Advisor's Signature: _____

President's Signature: _____

Approved: _____ Disapproved: _____ Date: _____

Coordinator of Student Organizations and Activities: _____



Go on a Field Trip

Members want to go to UNC for an art show.

The club is paying for the ticket fees and parking fees.

***Rules and regulations that apply to all Aims Community College students participating in an extracurricular travel which is either sponsored/co-sponsored by a recognized student organization, or in which the name of the institution is used in conjunction with the event must be adhered to (see Student Organization Handbook).**

1. Submit:
 - Official Function Form
 - Activity Request Form
 - Student Travel Agreement
 - Ticket prices, parking fees, other important information from event website
2. Fill out the Conference Worksheet.
3. A check request will be made out to field trip destination for registration, etc.
4. Reimbursement for lunch and parking fee will be made only if there is a receipt. Reimbursement will be put on a check request and go back to the advisor.
5. Submit:
 - Mileage Reimbursement Form

OFFICIAL FUNCTIONS REQUEST FORM

This form is used to pre-approve the Official Function activity.

Date of Function: _____

Location of Function: _____

Title & Description of Function (i.e., award ceremony, reception, etc.):

Purpose of Function:

Number of Attendees Expected:

Names/Titles of Individuals Attending:

College Personnel (group or individual)	Guests (group or individual)

Aims Club Advisor's
Signature: _____

Phone #: _____

Department: _____

For Office Use Only:

To the best of my knowledge, this function complies with Aims Community College's Official Functions procedures.

Administrator's Signature

Date

Senior Management Signature

Date

President's Signature* Date

**President's signature is required when a senior management team member is the requestor or when the requestor is asking for an exception to the official functions procedures. Use requisition or LPO for payment (attach approved Official Functions Request form and itemized receipts).*

Activity/Event Request Form

Student Organizations

(Submit at least 2 weeks prior to event
6 weeks prior to event for off-campus activities)

Student Organization: _____ Date: _____

Please mark those that would apply:

- ☐ **Off-Campus Community Service Project**
- ☐ **ASACC Co-Sponsorship Event**
- ☐ **Club Event Request**

Description of Activity/Event:

Location of Activity: _____

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

Members Anticipated to Participate: _____

Organization Hosting Event: _____

Hosting Organization Contact Person: _____

Forms Accompanying Activity/Event Request Form:

- | | |
|--|---|
| <input type="checkbox"/> Official Function Form | <input type="checkbox"/> Advisor Travel Request |
| <input type="checkbox"/> Procurement Card Checkout Sheet | <input type="checkbox"/> Pre/Post Conference Forms |
| <input type="checkbox"/> Preauthorized Event Expenditure Form | <input type="checkbox"/> Student Travel Agreement |
| <input type="checkbox"/> Community Service Project Report | <input type="checkbox"/> Deposit Form |

Advisor's Signature Approval: _____

President's Signature Approval: _____

Approved: _____ Disapproved: _____ Date: _____

Coordinator of Student Organizations and Activities: _____

Student Travel Agreement

Student Organizations

Expectations:

1. Participants' behavior traveling to or from, or during an event should be such that it reflects credit to the student's organization, Aims Community College, and the individual at all times.
2. The participants are expected to act in the best interests of the group/organization they represent, as well as Aims Community College.
3. Participants are expected to refrain from taking positions that are:
 - a. contrary to or in conflict with the interests and/or positions of the group or organization,
 - b. detrimental to the organization's purpose and mission.
4. In the absence of the student organization's advisor, the head student delegate will, at all times act as the official representative and spokesperson for the organization. This person will be identified by the organization's advisor.
5. Conference identification badges will be worn at all times by each participant.
6. Participants will dress appropriately for each situation (e.g., no grubbies at formal gathering or banquets).
7. Participants are expected to attend all business meetings, workshops, and other scheduled event programs. Please be prompt and prepared for each session.
8. Participants are to immediately report an accident, injury, or illness to the advisor or head delegate.
9. Alcoholic beverage consumption will not be tolerated at any official event program unless it is offered by the event organizers as part of a specific program. All students under the age of 21 must abide by the State of Colorado laws for drinking. The definition of official event program, as stated refers to the time students depart Aims Community College for the event, during the entire event, and travel back to Aims Community College Campus.
10. The use and/or possession of illegal drugs will **NOT** be tolerated.
11. Smoking is allowed only in designated areas.
12. Individuals responsible for theft and/or vandalism to any property during the course of an event will be held financially liable and will be subject to the Student Code of Conduct at Aims Community College.
13. Any long distance telephone calls, charges to the room, or other personal expenses will be the responsibility of the individual participant. Each participant having expenses covered by the group/organization must keep all

receipts and turn these receipts over to the advisor or student finance officer of the organization upon returning to in the College; these are used for the purpose of verification and reimbursement.

14. The advisor(s) to the student organization or the group leader, who accompanies a group participating in extracurricular travel, shall have total authority over the supervision of the event and its participants. This dictates that all student participants must adhere to and abide by the advisor/group leader decisions and judgments, and accord him/her the common courtesy and respect due by the virtue of being an official representative of the Aims Community College.

15. Participants who disregard/violate these rules/regulations are subject to disciplinary sanctions through the Student Life Office including but not limited to repayment of any and all fees, registrations, travel expenses, materials, and food costs by the Aims Community College and/or the student organization sponsoring the student.

****By signing below I acknowledge that I have read the student extracurricular travel code of conduct and understand the terms of the code. ****

Organization: _____ Date(s): _____

Conference/Fieldtrip/Activity: _____

Print Name	Signature
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Note: Students under the age of 18 must submit a parental permission slip prior to participation in the travel event.

Conference Worksheet Student Organizations

Organization: _____ Conference: _____

Location: _____ Dates: _____

Account number: _____ Number of Students: _____ Number of Advisors: _____

REGISTRATION:

Fee per student \$ _____ x number of students _____ = \$ _____

Fee per advisor \$ _____ x number of advisors _____ = \$ _____

LODGING:

Hotel _____

Room \$ _____ x number of rooms _____ x number of nights _____ = \$ _____

FOOD:

Breakfast x # of students x # of days _____ =
\$ _____ \$ _____

Lunch x # of students x # of days _____ =
\$ _____ \$ _____

Dinner x # of students x # of days _____ =
\$ _____ \$ _____

TRANSPORTATION:

Airfare \$ _____ x number of students/advisors _____ = \$ _____

Shuttles \$ _____ x per students/advisors _____ = \$ _____

Mileage (personal vehicles) _____ x \$.____ + parking fees \$ _____ = \$ _____

OTHER:

_____ = \$ _____

_____ = \$ _____

_____ = \$ _____

GRAND TOTAL: \$ _____

MILEAGE RECORD

Traveler's Name: _____ Aims ID: _____

Dept. & Home Base: _____ Phone #: _____

Month/Semester: _____ FOAP: _____

(Note: Mileage Record forms are to be submitted within 3 months of travel.)

Record round trip as one entry

DATE	POINT OF ORIGIN	DESTINATION	PURPOSE OF TRIP	TOTAL MILEAGE
TOTAL MILEAGE				

Continue on second page if needed

One-Way Mileage from Greeley					
Ault	11	Ft. Collins	35	Longmont	35
Boulder	50	Ft. Lupton	31	Loveland	22
Brighton	36	Ft. Morgan	52	Milliken	11
Colorado Springs	130	Gilcrest	12	Platteville	15
Denver	60	Johnstown	13	Pueblo	180
Eaton	7	Keenesburg	40	Windsor (City of)	17
Estes Park	65	Kersey	9	Windsor Automotive & Tech. Ctr.	9
One-Way Mileage from Loveland Campus to Fort Lupton Campus = 37 miles					

42¢ per mile x total mileage of _____ = TOTAL Reimbursement Claimed \$ _____

I certify that the above mileage claimed for reimbursement is true to the best of my knowledge and that payment for any of the above has not previously been received.

Traveler's Signature **Date** **Administrator Signature** **Date**



Hold a Raffle

Our club wants to raffle off a Wii as a fundraiser.

1. The Aims Official Raffle Manager from the Student Life Office must be present at all Aims Raffles.
Coordinate date, time, and location of raffle with his/her schedule.
2. Check club finances.
3. Submit at least one month in advance:
 - Official Function Form
 - Activity Request Form

If the raffle item(s) are worth over \$1000, the raffle ticket must be submitted to the state for approval. This process must be done and approved before any advertising can be done. The process will also take additional time for approval.
4. **Submit to Student Life front desk at least one month before the raffle/must also be on all advertising:**
 - ❖ Value of item(s) to be raffled
 - ❖ Name of company donating items, if donated
 - ❖ Date, time, location of raffle
 - ❖ Amount of each raffle ticket
5. To purchase raffled items follow “P” card, PO, or LPO procedures
6. During the raffle routinely deposit funds into the Student Life Office. All funds must be kept in a special raffle account. If the raffle earns over a certain amount, the club must pay a percentage to the state from the raffle. All checks must be made out to Aims Community College.
7. Submit:
 - All money must be submitted with a Deposit Form.

All raffle money is deposited in a special raffle account. Checks are then written to the state and club. The club check will be deposited into their account.
Do not combine other funds into
8. After the raffle
 - Make sure all deposits have been made through the Student Life Office
 - Contact the winner(s) and deliver their prize(s) and submit the winner’s names and list of prizes won to the Student Life Office

OFFICIAL FUNCTIONS REQUEST FORM

This form is used to pre-approve the Official Function activity.

Date of Function:

Location of Function:

Title & Description of Function (i.e., award ceremony, reception, etc.):

Purpose of Function:

Number of Attendees Expected:

Names/Titles of Individuals Attending:

College Personnel (group or individual)	Guests (group or individual)

Aims Club Advisor's
Signature:

Phone #:

Department:

For Office Use Only:

To the best of my knowledge, this function complies with Aims Community College's Official Functions procedures.

Administrator's Signature

Date

Senior Management Signature

Date

President's Signature* Date

**President's signature is required when a senior management team member is the requestor or when the requestor is asking for an exception to the official functions procedures. Use requisition or LPO for payment (attach approved Official Functions Request form and itemized receipts).*

Activity/Event Request Form

Student Organizations

(Submit at least 2 weeks prior to event
6 weeks prior to event for off-campus activities)

Student Organization: _____ Date: _____

Please mark those that would apply:

- ☐ **Off-Campus Community Service Project**
- ☐ **ASACC Co-Sponsorship Event**
- ☐ **Club Event Request**

Description of Activity/Event:

Location of Activity: _____

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

Members Anticipated to Participate: _____

Organization Hosting Event: _____

Hosting Organization Contact Person: _____

Forms Accompanying Activity/Event Request Form:

- | | |
|--|---|
| <input type="checkbox"/> Official Function Form | <input type="checkbox"/> Advisor Travel Request |
| <input type="checkbox"/> Procurement Card Checkout Sheet | <input type="checkbox"/> Pre/Post Conference Forms |
| <input type="checkbox"/> Preauthorized Event Expenditure Form | <input type="checkbox"/> Student Travel Agreement |
| <input type="checkbox"/> Community Service Project Report | <input type="checkbox"/> Deposit Form |

Advisor's Signature Approval: _____

President's Signature Approval: _____

Approved: _____ Disapproved: _____ Date: _____

Coordinator of Student Organizations and Activities: _____

Deposit Form

Student Organizations

Date _____

Deposit Number _____

Name of Organization _____

Organization Number _____

Activity Description: _____

Gross Receipts from Activity: \$ _____

Individual Dues: \$ _____ x Number of Members: _____ = Gross Dues: \$ _____

Gross Receipts from Activity: \$ _____

Gross Receipts from Dues: \$ _____

Total Deposit: \$ _____

Turned in by: _____

Position: _____

Check Listing- Please attach adding machine tape of checks

Name	Amount	Name	Amount
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

Cash record:

.01 _____ **.05** _____ **.10** _____ **.25** _____ **.50** _____

1.00 _____ **5.00** _____ **10.00** _____ **20.00** _____ **100.00** _____

Total Checks \$ _____ **+ Total Cash \$** _____ **= Total Deposit \$** _____

Student Life Office Use Only

Received By: _____ **Date:** _____



Hold a Fundraiser

Our club wants to sell Orange Crush soda, "I have a CRUSH on you!" as a fundraiser during the week of Valentine's Day.

1. Check club finances
2. Submit:
 - Official Function Form
 - Activity Request Form (include all dates of tabling)
3. Purchase soda/items needed with the "P" card if under \$1000. Return "P" card and original receipt for the Student Life Office the same day as purchasing items. **Aims is tax exempt. Follow all "P" card rules.**
4. Reserve tabling space. Contact the correct person to reserve location, times, tables, and chairs.
5. After the event
Submit:
 - Deposit Form and all funds in the Student Life Office

OFFICIAL FUNCTIONS REQUEST FORM

This form is used to pre-approve the Official Function activity.

Date of Function:

Location of Function:

Title & Description of Function (i.e., award ceremony, reception, etc.):

Purpose of Function:

Number of Attendees Expected:

Names/Titles of Individuals Attending:

College Personnel (group or individual)	Guests (group or individual)

Aims Club Advisor's
Signature:

Phone #:

Department:

For Office Use Only:

To the best of my knowledge, this function complies with Aims Community College's Official Functions procedures.

Administrator's Signature

Date

Senior Management Signature

Date

President's Signature* Date

**President's signature is required when a senior management team member is the requestor or when the requestor is asking for an exception to the official functions procedures. Use requisition or LPO for payment (attach approved Official Functions Request form and itemized receipts).*

Activity/Event Request Form

Student Organizations

(Submit at least 2 weeks prior to event
6 weeks prior to event for off-campus activities)

Student Organization: _____ Date: _____

Please mark those that would apply:

- ☐ **Off-Campus Community Service Project**
- ☐ **ASACC Co-Sponsorship Event**
- ☐ **Club Event Request**

Description of Activity/Event: _____

Location of Activity: _____

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

Members Anticipated to Participate: _____

Organization Hosting Event: _____

Hosting Organization Contact Person: _____

Forms Accompanying Activity/Event Request Form:

- | | |
|--|---|
| <input type="checkbox"/> Official Function Form | <input type="checkbox"/> Advisor Travel Request |
| <input type="checkbox"/> Procurement Card Checkout Sheet | <input type="checkbox"/> Pre/Post Conference Forms |
| <input type="checkbox"/> Preauthorized Event Expenditure Form | <input type="checkbox"/> Student Travel Agreement |
| <input type="checkbox"/> Community Service Project Report | <input type="checkbox"/> Deposit Form |

Advisor's Signature Approval: _____

President's Signature Approval: _____

Approved: _____ Disapproved: _____ Date: _____

Coordinator of Student Organizations and Activities: _____

Deposit Form

Student Organizations

Date _____

Deposit Number _____

Name of Organization _____

Organization Number _____

Activity Description: _____

Gross Receipts from Activity: \$ _____

Individual Dues: \$ _____ x Number of Members: _____ = Gross Dues: \$ _____

Gross Receipts from Activity: \$ _____

Gross Receipts from Dues: \$ _____

Total Deposit: \$ _____

Turned in by: _____

Position: _____

Check Listing- Please attach adding machine tape of checks

Name	Amount	Name	Amount
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

Cash record:

.01 _____ .05 _____ .10 _____ .25 _____ .50 _____

1.00 _____ 5.00 _____ 10.00 _____ 20.00 _____ 100.00 _____

Total Checks \$ _____ + Total Cash \$ _____ = Total Deposit \$ _____

Student Life Office Use Only

Received By: _____ **Date:** _____



Go to a Conference/Field Trip

Our club wants to go to a conference in Denver.

1. Check club finances.
2. Submit at least one month in advance:
 - Pre Conference Information Sheet **six weeks** in advance of conference
 - Copy of information on lodging costs, registration fees, parking fees, shuttle fees, airline costs, per diem for meals, schedule of events, etc.
 - Travel Request (TR) filled out by advisor in his/her name **six weeks** in advance with all charges that the club is using club funds for and paperwork to prove lodging, registration fees, parking fees, shuttle fees, and airline fees. Student A#s and names must be submitted. TR must be approved by the Director of Student Life and the President of the college before any reservations are made. Travel Request Forms may be found on the Aims website.
3. Complete the Conference Worksheet
4. Submit to the Student Life Office before leaving:
 - Student Travel Agreement signed by all attending members
5. Submit after the conference:
 - Post Conference Report Form
 - Advisor Travel Expense Reimbursement with original receipts
Travel Expense Reimbursement Forms may be found on the Aims website.

Pre Conference Information Sheet

Student Organizations

This form is to be completed by student organizations planning on attending conferences/meeting/workshops, hereafter referred to as conference(s), on or off campus. Completed forms should be sent to the Student Life Office at least one month prior to the event. Organizations planning on attending such events during the summer term should submit this form not later than May 1.

Student Organization: _____

Name of Conference: _____

Dates of Conference: _____

Purpose of Conference: _____

How will your organization benefit by attending this conference?

Destination: _____

Name of Hotel: _____

Dates of Travel: _____

Method of Travel: _____

Projected Cost Per Person: _____ Total Projected Costs: _____

Current Organization Fund Balance: _____ Is the organization paying all expenses? ____

Number of Students Attending: _____ Number of Advisors Attending: _____

Name of Advisor and TR Number: _____

****Reminder, no travel arrangements or conference fees can be made until the Travel Request (TR) has been completed and all appropriate signatures have been secured.**

TRAVEL REQUEST AND AUTHORIZATION (TR)

Traveler Name		Phone #	Date Submitted
Aims ID		Department	
Prepared By: Name	Phone #	Departure Date:	Return Date:
		Departure Time:	Return Time:
Activity:			
City / State:			
Additional Comments:			

Note: Please attach required documentation per Travel Procedures (i.e., agenda, meeting flyer, registration form).

Activity Authorization

I certify that this trip is necessary to conduct College business.

(1) _____
Traveler's Signature **Date**

(2) _____
Traveler's Supervisor/Administrator Signature **Date**

(6) _____
President's Signature **Date**
(for out-of-state travel only)

ESTIMATED EXPENSES	
Lodging	
Meals \$ _____ <i>per diem</i>	
Registration	
Parking	
Shuttle / Taxi	
Airline <i>(prior to purchase, see Travel Procedures for instructions)</i>	
Rental Car <i>(prior to rental, see Travel Procedures for instructions)</i>	
Other <i>(specify)</i>	
Other <i>(specify)</i>	
Personal Car Miles	miles
x 42¢ per mile	
TOTAL ESTIMATED EXPENSES	

Budget Authorization

I authorize expenses charged to the account(s) as indicated.

Budget Authorization Signature(s)	Date	FOAP	Amount Authorized
(3) Department Funds			Max. <input type="checkbox"/> Max. <input type="checkbox"/>
(4) Professional Development Funds <i>(if applicable)</i>			Max. <input type="checkbox"/>
(5) Grants Funds <i>(if applicable)</i>			Max. <input type="checkbox"/>

NOTE: Approved TR will be returned to traveler's department—then to traveler.

Conference Worksheet Student Organizations

Organization: _____ Conference: _____

Location: _____ Dates: _____

Account number: _____ Number of Students: _____ Number of Advisors: _____

REGISTRATION:

Fee per student \$ _____ x number of students _____ = \$ _____

Fee per advisor \$ _____ x number of advisors _____ = \$ _____

LODGING:

Hotel _____

Room \$ _____ x number of rooms _____ x number of nights _____ = \$ _____

FOOD:

Breakfast x # of students x # of days _____ =
\$ _____ \$ _____

Lunch x # of students x # of days _____ =
\$ _____ \$ _____

Dinner x # of students x # of days _____ =
\$ _____ \$ _____

TRANSPORTATION:

Airfare \$ _____ x number of students/advisors _____ = \$ _____

Shuttles \$ _____ x per students/advisors _____ = \$ _____

Mileage (personal vehicles) _____ x \$.____ + parking fees \$ _____ = \$ _____

OTHER:

_____ = \$ _____

_____ = \$ _____

_____ = \$ _____

GRAND TOTAL: \$ _____

Student Travel Agreement

Student Organizations

Expectations:

1. Participants' behavior traveling to or from, or during an event should be such that it reflects credit to the student's organization, Aims Community College, and the individual at all times.
2. The participants are expected to act in the best interests of the group/organization they represent, as well as Aims Community College.
3. Participants are expected to refrain from taking positions that are:
 - a. contrary to or in conflict with the interests and/or positions of the group or organization,
 - b. detrimental to the organization's purpose and mission.
4. In the absence of the student organization's advisor, the head student delegate will, at all times act as the official representative and spokesperson for the organization. This person will be identified by the organization's advisor.
5. Conference identification badges will be worn at all times by each participant.
6. Participants will dress appropriately for each situation (e.g., no grubbies at formal gathering or banquets).
7. Participants are expected to attend all business meetings, workshops, and other scheduled event programs. Please be prompt and prepared for each session.
8. Participants are to immediately report an accident, injury, or illness to the advisor or head delegate.
9. Alcoholic beverage consumption will not be tolerated at any official event program unless it is offered by the event organizers as part of a specific program. All students under the age of 21 must abide by the State of Colorado laws for drinking. The definition of official event program, as stated refers to the time students depart Aims Community College for the event, during the entire event, and travel back to Aims Community College Campus.
10. The use and/or possession of illegal drugs will **NOT** be tolerated.
11. Smoking is allowed only in designated areas.
12. Individuals responsible for theft and/or vandalism to any property during the course of an event will be held financially liable and will be subject to the Student Code of Conduct at Aims Community College.
13. Any long distance telephone calls, charges to the room, or other personal expenses will be the responsibility of the individual participant. Each participant having expenses covered by the group/organization must keep all

receipts and turn these receipts over to the advisor or student finance officer of the organization upon returning to in the College; these are used for the purpose of verification and reimbursement.

14. The advisor(s) to the student organization or the group leader, who accompanies a group participating in extracurricular travel, shall have total authority over the supervision of the event and its participants. This dictates that all student participants must adhere to and abide by the advisor/group leader decisions and judgments, and accord him/her the common courtesy and respect due by the virtue of being an official representative of the Aims Community College.
15. Participants who disregard/violate these rules/regulations are subject to disciplinary sanctions through the Student Life Office including but not limited to repayment of any and all fees, registrations, travel expenses, materials, and food costs by the Aims Community College and/or the student organization sponsoring the student.

****By signing below I acknowledge that I have read the student extracurricular travel code of conduct and understand the terms of the code. ****

Organization: _____ Date(s): _____

Conference/Fieldtrip/Activity: _____

Print Name	Signature
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Note: Students under the age of 18 must submit a parental permission slip prior to participation in the travel event.

Post Conference Report Form Student Organizations

This form is to be completed by a group/organization officer or designee of the advisor at the conclusion of the conference/meeting/workshop and returned to the Student Life Office, Room CCTR 130, within five days after the event.

Name of Conference /Meeting/ Workshop Attended: _____

Travel/ Trip Destination: _____ Dates involved: _____

How did this conference/meeting/workshop benefit the group/organization?

List the names of all students and advisors attending this event:

<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

List the names of each student and advisor receiving award and name of the award:

Name	Award
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

Person completing this form: _____

Date: _____



Receive a Donation

Can our club receive a donation? YES!!

1. All banking must go through the Student Life Office.
2. All checks must be made out to Aims Community College.
3. Donations are not tax deductible.
4. Submit:
 - Deposit Form

Deposit Form

Student Organizations

Date _____

Deposit Number _____

Name of Organization _____

Organization Number _____

Activity Description: _____

Gross Receipts from Activity: \$ _____

Individual Dues: \$ _____ x Number of Members: _____ = Gross Dues: \$ _____

Gross Receipts from Activity: \$ _____

Gross Receipts from Dues: \$ _____

Total Deposit: \$ _____

Turned in by: _____

Position: _____

Check Listing- Please attach adding machine tape of checks

Name	Amount	Name	Amount
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

Cash record:

.01 _____ .05 _____ .10 _____ .25 _____ .50 _____

1.00 _____ 5.00 _____ 10.00 _____ 20.00 _____ 100.00 _____

Total Checks \$ _____ + **Total Cash** \$ _____ = **Total Deposit** \$ _____

Student Life Office Use Only

Received By: _____ **Date:** _____