



Algonquin Students' Association

CORPORATION

Employer Network Funding Application

The Students' Association is committed to supporting on campus activities initiated by students that encourages learning and creativity and increases employment opportunities.

Criteria Eligible For Funding

1. Designed to help you fund career nights/fairs and guest speakers.

Criteria and Guidelines:

- Only Activity fee paying students will be considered for funding.
- Applications must be submitted to the Students' Association no later than 10 business days prior to the event.
- All applications must have a program Chairperson's signature.
- A complete list of student numbers and signatures of participants must be included.

Criteria NOT Eligible for funding

1. Any service to be provided by a professor, instructor or any other person(s) employed by Algonquin College will not be considered for funding
2. Funding will not be provided for academic requirements.

Funding:

The Students Association reserves the right to refuse any application and retains sole discretion to determine the approved funding amounts in order to accommodate all requests received and anticipated throughout the year.

- All applications must include detailed and official estimates of all expenses from the suppliers and/or companies involved.
- When approved, all cheques will be made strictly to companies, stores, or organizations and not to a student directly. The president or vice president of the club is responsible for picking up the cheques from the Students' Association and delivering it to their suppliers.

Please note that Applicants cannot benefit financially from this application.

An incomplete application form will not be processed

I have read and understood all of the above information

Signature of Applicant

Signature of Co-applicant

Employer Network Funding Application Form

Purpose of Employer Network Funding (please be specific):

Benefit/Merit:

Student Contact Information:

Name	_____	Name	_____
Email Address	_____	Email Address	_____
Telephone Number	_____	Telephone Number	_____
Student Number	_____	Student Number	_____
Program Name	_____	No. of Participants	_____

Please Note: A complete list of participants and student ID numbers must be submitted at the time of application.

Requested Funding Expenses:

Please provide official quotes/estimates from each supplier and/or company. Attach additional pages as needed.

Company Name	_____	Company Name	_____
Street	_____	Street	_____
City	_____	City	_____

Amount of Funding Requested	_____	Amount of Funding Requested	_____
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Company Name	_____	Company Name	_____
Street	_____	Street	_____
City	_____	City	_____

Amount of Funding Requested	_____	Amount of Funding Requested	_____
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*Please note: Copies of the invoices/estimates/receipts must be submitted with application, complete with company name and amount due.

Funding provided by other Sources:

Amount of Funding from the College: \$ _____

***Acknowledgement:**

I certify that the above funding request is not a course or program requirement as per article 1 and 2 of Criteria Not Eligible for Funding.

Signature of Program Chairperson

