|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A. Contact Information - Applicant | |  | |  | |
| Name of Student Organisation |  | | | | |
| Name of Applicant |  | | Student ID | |  |
| E-mail Address |  | | Mobile Number | |  |

|  |  |
| --- | --- |
| B. Competition Information | |
| Competition Name |  |
| Competition Organiser |  |
| Date |  |
| Venue |  |
| Representing: | \* *Individual/ University / Country* |
| Level | \* *Tertiary /* *National / International / Others* |
| Website |  |
| Poster (please enclose, if any) |  |
| Reason for Participation |  |

## *\* Delete where applicable*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| C. List of Participants | | | |  | |
| **No** | **Name** | **Student ID** | **Remarks** | |
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| D. Projected Expenditure | | | | |  |
| **Item** | **Amount per pax (S$)** | **No of Pax** | **Total Amount (S$)** | **Source of Funds**  **(Income/ OSL Seed Fund^/ Subsidy^)** | |
| Registration Fee |  |  |  |  | |
|  |  |  |  |  | |

^ subject to approval

|  |  |  |  |
| --- | --- | --- | --- |
| E. List of Competition Prizes Offered | |  |  |
| Please note that if prize money is won in the name of the student organisation, students should declare and deposit the prize money to the student organisation account via Income Deposit Form within 3 working days. | | | |
| **Award Category** | **Monetary Amount (S$)** | **Gift-in-Kind** | |
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| F. Signature - Applicant | |
| By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if the application is approved, any false statements, omissions, or other misrepresentations made by me on this application may result in this application being void and null.  By submitting my details here, I agree that Office of Student Life may collect, use and disclose the information above for administration purposes. | |
| Signature |  |
| Date |  |

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| --- | --- | --- | --- |
| G. Endorsement by President of Student Organisation | | | |
| I endorse the application to participate in the competition. | | | |
| Name of President |  | Student ID |  |
| E-mail Address |  | Mobile Number |  |
| Signature |  | | |
| Date |  | | |

|  |  |
| --- | --- |
| H. Approval - Office of Student Life | |
|  | |
| Name |  |
| Designation |  |
| Signature |  |
| Date |  |