



Office of the Vice-Chancellor Xi

**APPLICATION FOR PERMISSION TO SELL OR CONDUCT FUNDRAISING ACTIVITIES
ON & OFF CAMPUS AND ONLINE**

This form should be submitted to: pace@uog.edu.gy

***Cc to: christine.chowargir@uog.edu.gy keon.heywood@uog.edu.gy and
latoya.khemraj@uog.edu.gy***

***studentswelfare@uog.edu.gy (cc only for students activities/events, all others such
as faculties are to utilize the first three mentioned emails)***

1. Name of Group/Committee/Club/Other (state)

.....
2. Address/location of Group/Committee/Club/Other (state) including faculty, Department, Course

.....
3. Main Contact Name, USI/STAFF ID & Tel. No.

.....
4. a) Name and USI/STAFF ID of Chairperson/President
.....
b) Name and US/STAFF ID of Treasurer
.....
c) Name and USI/STAFF ID of Secretary
.....
5. Proposed activities/event(s). ***Use a separate sheet if necessary (if activities/events are off campus they must be assessed by the Internal Auditor)***
 1.
 2.
 3.
6. Date(s)/Time(s)/Location(s) of activities/events in order of activity. ***Use a separate sheet if necessary (follow in order of activity at #5)***
 - 1.
 - 2.
 - 3.
 - 4.
7. Specific purpose(s) for which the funds/materials raised will be used ***Use a separate sheet if necessary (follow in order of activity at #5)***
 1.
 2.
 3.
 4.

8. Amount targeted to be raised. *Use a separate sheet if necessary (follow in order of activity at #5)*
1. 2. 3. 4.
9. Approved Bank Account No. (if any, state account holder full name and address; bank name, branch, address, type of account), MMG, (if any, state account holder full name and address, telephone number), or proposed location i.e. the Bursary for the safe-keeping of funds/materials.
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-
10. Signatories of accounts and financial transactions.
1.
2.
3.
11. Name, Signature and Student USI of persons responsible for reporting on the collection and allocation of the funds for the purposes mentioned above or any other purposes that may arise.
1. Name Signature USI/ STAFF ID
2. Name Signature USI/ STAFF ID
3. Name Signature USI/ STAFF ID
12. I, the undersigned, certify that the information given above is to the best of my belief and knowledge true and correct. I pledge to allow the scrutiny of the books and records by the authorized University Officers.

.....

Signature

Secretary of Group/Committee/Club/Other

Date:

FOR OFFICIAL USE ONLY (To be filled out by the user of this form)

Recommended	Yes	No	
		
			Signature and stamp
			Head of Dept. /Admin. Officer/Lecturer/ Campus Advisor

Recommended	Yes ()	No ()	
		
			Signature and stamp
			President/Secretary, U.G.S.S

Recommended	Yes ()	No ()	
		
			Signature and stamp
			Registrar/DVC Finance and Administration

Preliminary Approval Yes No

.....

Signature and stamp

Vice Chancellor - Office of the Vice-Chancellor Xi -
Philanthropy, Alumni & Civic Engagement (PACE)

Standard Administration Fee - \$2,000 per day up to two days. An additional fee of \$1,000 is required for each additional day requested. **(This is not applicable to club meetings, religious, off campus event/activity.)**

Paid: Yes () No ()

.....

Receipt No.

.....

Signature and stamp

Bursary

Environmental Deposit - \$5,000 per event. This fee is refundable based on the report of inspection by the University of Guyana’s officer. **(This is not applicable to online and off campus event/activity.)**

Amount Paid:

Receipt No.

.....

Signature and Stamp

Bursary

The section below is to be completed by Office of the Vice-Chancellor Xi -Philanthropy, Alumni & Civic Engagement (PACE)

Environmental requirements met	Yes ()	No ()
Final Approval	Yes ()	No ()
Financial Statement received	Yes ()	No ()
Deposit refunded	Yes ()	No ()

Certified by:

Deposit received by:

Date:

Recommended by:

.....

Signature and Stamp

Vice Chancellor - Office of the Vice-Chancellor Xi -
Philanthropy, Alumni & Civic Engagement (PACE)