

Application Form



Category I Award of the year

5. Event of the Year

Name of Event

Name of Organizer / Student Activity Unit

1. Basic Information for Student Activity Unit

(1.1) Name of Organizer / Student Activity Unit

(1.2) Name of Student Activity Unit's Advisor / Event's Advisor

Name-Surname (Mr./Ms.) _____

Position _____ Contact No. _____ E-mail _____

(1.3) Name-Surname of Student Activity Unit's President / Head Project

(Mr./Ms.) _____ Line ID. _____

Contact No. _____ E-mail _____

(1.4) Mission, Objective of Student Activity Units

(1.5) Number of Event Committee and Staff _____Persons

(1.6) Description of Achievements and High Light of event

2. Detail of Event

(2.1) Name of Event

(2.2) Rational of Event

(2.3) Objective of Event

(2.4) Target group / Number of Target

(2.5) Achievements of Event

3. Please describe outstanding of the event. (Summary of planning and management, variety and creativity, achievement and Impact etc.)

Signature_____

(_____)

Position _____(Event Director)

____ / ____ / ____

Required documents:

- **Printed**

1. Application Form
2. Copies of event proposal
3. Event committee and staff name list
4. Evaluation report

- **CD**

1. High quality of Photo file at least 4 – 5 pictures.
2. VDO presentation about event (not longer than 2 minutes)
3. PDF files of all related documents.

Place for Submission:

Center for Student Leadership and Experiential Learning (CSLEL) office, the ground floor of King David Resident Hall

Tel. 02-723-2222 Ext. 7292

*****All applicants must submit the required documents at CSLEL office and in case of any correction, please notify us by sending email to sa.cslel@au.edu*****