

SOF Grant Application – Travel Funds

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Submitter's Name * Phillip Aguiniga

Submitter's Number * (607) 505-5536

Submitter's Email * aguinigap@gfUSD.net

Submitter's relation to the Student Organization * BC Pre-Med Club Treasurer

Name of Student Organization * BC Pre-Med Club

Mission of Student Organization *

The Mission of the Pre-Med Club is to keep students in all aspects of medicine. PMC will take the hopes and dreams of students interested in all aspects of medicine and turn them in to realities. PMC will address the crisis our country faces that is the doctor shortage happening within our borders by giving our members opportunities to excel. Our mission is to solidify the decision and assist student's journey towards their future in medicine. The culminating goal is to help our community in whatever way we can, which not only includes healing, but volunteering and offering our time for great causes.

Name of conference or event you are attending * 13th Annual Davis

Start Date of Travel * Saturday, October 10, 2015

End Date of Travel * Sunday, October 11, 2015

Start of Event Travel: * 2:00:00 AM

End of Event Travel: * 10:00:00 PM

City and State of Travel Location Destination * Davis, California

Address of Travel Destination *  1 Shields Ave
Davis, CA 95616
United States

Are the Travel details Yes, I have the confirmations

confirmed? *

Are all students attending part of the StudOrg? *

Yes

Is the advisor alongwith the StudOrg members? *

Yes

How many are traveling? *

14

If there any other StudOrgs, Departments, or other groups that are co-sponsoring this event with you, please list them here.

Conference or Travel Website *

[http://www.ucdprehealth.org/?utm_source=2014+Attendees&utm_campaign=f6db51fe67-General_Announcement_6_12_2015&utm_medium=email&utm_term=0_696e643d94-f6db51fe67-288995689&ct=t\(General_Announcement_7_14_20157_14_2015\)&mc_cid=f6db51fe67&mc_eid=70b7d7a5d8](http://www.ucdprehealth.org/?utm_source=2014+Attendees&utm_campaign=f6db51fe67-General_Announcement_6_12_2015&utm_medium=email&utm_term=0_696e643d94-f6db51fe67-288995689&ct=t(General_Announcement_7_14_20157_14_2015)&mc_cid=f6db51fe67&mc_eid=70b7d7a5d8)

Conference or Travel Agenda or Scheudle *



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Brief overview or synopsis of your proposed travel *

Travel arrangements will me be met through the all inclusive package offered that starts at csu. All students involved in this trip will need to be at the csu parking lot by 2am Saturday morning.

Rationale of the proposed travel *

The all inclusive package is 95 dollars (about 100 with processing fees); this includes transportation, food, hotel stay, and conference ticket. paying for 50% of each student's ticket will cover all transportation costs and other expenses in the process. This makes the trip more feasible and economically beneficial to the club.

Please indicate the methods you plan to use for advertisement and promotion for your travel. Please explain what methods you are planning to use to select the participants. *

BC Pre-Med Club members needed to participate in volunteer opportunities to qualify to receive aid for this trip though the club. This information was advertised through club meetings.

Will you StudOrg or a

No

member of
your
Organization
be presenting?
*

Methods of Evaluation * Students who attend this conference will have a broader knowledge of health fields and will then be able to spread this information at Bakersfield College via Pre-Med Club.

Advisor
Statement *



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Form A –
Student
Election
Private
Transportation

Form B –
Parent–
Guardian
Student
Consent

Form C –
Request for
Student Trip

Form D –
Student Trip
Emergency
Contact

No more than 50% of the total cost of travel will be awarded per request the rest must come from self-generated funds. Where will the rest of the money be coming from?
*

The rest of the funding for the ticket of each club member will come through their own means as the other half of the ticket price, we agreed is needed to cover all other expenses that the SOF grant does not cover

Total Funds Requested * 700

SOF Grant
Itemized
Budget Report

Quote
Attachment –
Registration
Quote

Quote
Attachment –
Travel Quote

Quote
Attachment –
Hotel Quote

Quote
Attachment

Quote
Attachment

Quote
Attachment

Will your StudOrg reimburse for Per Diem? * Yes, full amount

If your StudOrg is requesting funds for your advisor, how much? * 100

In order to submit a SOF Grant, all names listed on the StudOrg Leadership Membership must agree to the [SOF Grant and Finance Process and Policy](#). The submitter agrees on behalf of all members of the organization.
*

- I/We Agree

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