**BES-SC Funding Proposal**

Annual funding opportunities are available for Student Chapter Affiliated Clubs (SCACs)\* with the following criteria:

* The event is aimed to advance the biomedical/bioscience/bioengineering profession through academic or social activities.
* The event is a *collaborative effort* between different student groups intra/inter-institutions.
* The event is open to all BES Student Chapter members.
* Within a financial year (August – July), each group can apply for a **maximum of 2 times** – provided that the collaborators are from different institution(s).

Proposal is to be submitted to Student Chapter Advisory Board (SCAB: [studentchapter@bes.org.sg](mailto:studentchapter@bes.org.sg)) for considerations at least 6 weeks before the event.

*\*To form affiliation with BES-SC, please check* <http://www.bes.org.sg/student-chapter/affiliated-clubs>

*This proposal consists of two parts. Please complete all parts.*

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| --- | --- |
| **Date of Application:** | Click here to enter a date. |

**Part I. Details of Organizers**

|  |  |  |  |
| --- | --- | --- | --- |
| **Proposer Club:** |  | **Club Name:** | Click here to enter text. |
| **Name of contact:** | Click here to enter text. |
| **Email:** | Click here to enter text. |
| **Mobile:** | Click here to enter text. |
| **Collaborator Club(s):**  *Proposal will not be considered without collaborators* | **1.** | **Club Name:** | Click here to enter text. |
| **Name of contact:** | Click here to enter text. |
| **Email:** | Click here to enter text. |
| **Mobile:** | Click here to enter text. |
| **2.** | **Club Name:** | Click here to enter text. |
| **Name of contact:** | Click here to enter text. |
| **Email:** | Click here to enter text. |
| **Mobile:** | Click here to enter text. |

**Part II. Details of Proposed Event**

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| --- | --- | --- |
| **Name of Proposed Event:** | Click here to enter text. | |
| **Date of Event:** | Click here to enter a date. | |
| **Purpose of Event:** | Click here to enter text. | |
| **Detailed Description:**  *This row is expandable* | Click here to enter text. | |
| **Expected Attendees:** | **Number:** | Click here to enter text. |
| **Education Level:**  *Select all that are applicable* | JC Poly UG PG  Other (specify) |
| **Requested Funding Amount:**  *Two levels of funding are available:*  *≤ $250 and ≤ $500* | Click here to enter text. | |
| **Budget Breakdown:**  *Please be specific* | Click here to enter text. | |