



澳門大學  
UNIVERSIDADE DE MACAU  
UNIVERSITY OF MACAU

## SAO Funding Scheme Application Form

- ※ Please complete all items consistently in either English or Chinese. Fill in 1 application form and 1 budget plan for each activity.  
※ Please note that handwritten forms will not be accepted.

### Part 1: Funding Information

Apply funding in which Batch?	Batch _____ of Year _____
Apply funding in which Area?	<input type="checkbox"/> Student Activities <input type="checkbox"/> Student Exchange Activities <input type="checkbox"/> Student Organization Support <input type="checkbox"/> Specified Activities
Requested amount of funding	MOP

### Part 2: Basic Information

Name of Student Organization	(Chinese)
	(English)
Name of Applicant	(Chinese)
	(English)
Position	
Contacts	(Phone) _____ (Email) _____

### Part 3: Activity Proposed

Activity Name	(Chinese)
	(English)
Type of Participants	<input type="checkbox"/> Organization Members Only <input type="checkbox"/> All UM Students/Staff <input type="checkbox"/> Open to Public
Expected Number of Participants	
Activity Date / Period	
Activity Venue	
Type of Activity (Choose 1 option)	<input type="checkbox"/> Interest course <input type="checkbox"/> Workshop/Training <input type="checkbox"/> Lecture/Seminar <input type="checkbox"/> Publication <input type="checkbox"/> Film screening <input type="checkbox"/> Performance <input type="checkbox"/> Competition <input type="checkbox"/> Sports competition <input type="checkbox"/> Orientation <input type="checkbox"/> Visit/ Exchange <input type="checkbox"/> Caring activities <input type="checkbox"/> Sharing Session <input type="checkbox"/> Festive Celebration <input type="checkbox"/> Others. Please state: _____
Name(s) of Co-organizer(s) (if applicable)	
Nationality of guest(s) and performer(s)	<input type="checkbox"/> Local <input type="checkbox"/> Non-local <input type="checkbox"/> To be confirmed <input type="checkbox"/> N/A

