

**2019 FINANCIAL ASSISTANCE APPLICATION**

HNMUN Latin America is committed to providing the opportunity for all interested students to participate in our conference. Please refer to our Guide to Fundraising for fundraising ideas as your delegation will be expected to demonstrate previous and/or ongoing fundraising efforts if you are interested in applying for financial aid. Your application will be processed by the Secretariat of HNMUN Latin America 2019 and evaluated based upon demonstrated need and efforts.

Delegations are encouraged to apply for financial assistance if budgetary shortfalls would inhibit their ability to participate in the conference. Financial aid grants may be used to help subsidize conference fees, transportation, and hotel costs. Please keep in mind that financial aid is given as reimbursement to delegations **after the last session of conference**, as delegate attendance at all committee sessions is required in order to receive the reimbursement.

Financial Assistance applications will be considered with priority given to those submitted by **15 September 2018**, and then on a rolling basis with whatever funds remain until a final deadline on **15 November 2018**. Your HNMUN-LA 2019 Financial Assistance application must be submitted by 11:59PM EST of the above deadlines in .doc (Microsoft Word) or PDF format and must include the following:

PART I. Cover Letter with Written Consent to Conference and Financial Assistance Policies

PART II. Typed answers to Supplemental Response Questions

PART III. Detailed Budget in accordance with our Budget Proposal Guidelines

PART IV. Additional Documentation: Evidence of Fundraising Efforts (including but not limited to any letters or proposals sent out to potential sponsors, correspondence between your delegation and potential sponsors, notice of all pledged sponsorships, and information on all executed and prospective fundraisers), Verifiable Sources of Hotel/Transportation costs, Any other supporting documents

Please note that incomplete applications will not be eligible for consideration.

**Only ONE application should be submitted for each school.** The application should be signed by either a Faculty Advisor or Head Delegate. This person will serve as the authorized representative on the delegation’s behalf for any further inquiries.

**All application forms should be submitted by email to finance@hnmunla.org with “2019 Financial Aid Application - <School Name>” as the subject.**

If you have any questions or concerns regarding the 2019 Financial Aid Application, potential ideas for fundraising or money management, please contact Atheena Arasoo, USG Finance, at: finance@hnmunla.org.

**Financial Assistance Policies**

An application for financial assistance does not guarantee HNMUN Latin America’s provision of any amount of aid, full or partial. Applying delegations will be notified of the Secretariat’s official decisions by early December 2018.

Financial assistance is contingent upon a delegation’s completion of all committee sessions. Delegates receiving financial assistance must attend every HNMUN Latin America 2019 committee session for which they are registered in order to receive their financial aid award. Only the committee staff is authorized to determine attendance.

Financial assistance is distributed in the form of reimbursements at the end of conference. No advance payments will be made. All delegations must pay their conference dues in accordance with the HNMUN Latin America 2019 Conference Policies.

Official receipts are necessary for any financial assistance reimbursements. No expenses will be reimbursed without their corresponding receipts. The Secretariat may choose to not reimburse spending for previously endorsed assistance if the expenses made do not qualify for it. The Secretariat has the discretion to determine whether certain expenses qualify for reimbursement.

All reimbursements will be made at the discretion of the Secretariat and the Secretariat reserves the right to refuse to reimburse delegates if any of the above conditions are not met.

Financial assistance decisions are final and may not be appealed.

**Part I: Cover Letter**

Name of University:

Contact Person (Head Delegate or Faculty Advisor):

Contact Information

Email:

Phone Number:

University Address:

*“I certify that the information presented on this form and submitted as part of the HNMUN Latin America 2019 Financial Assistance Application provides the most accurate representation of the financial situation of our school, our delegation, and our individual delegates. I understand that any misrepresentation on our part will automatically render our delegation ineligible for financial assistance and may jeopardize our participation in HNMUN Latin America 2019.*

*I understand the conditions imposed on financial assistant and will comply with all HNMUN Latin America regulations.”*

Signature of consent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Please sign and scan the Cover Letter for your application or include a digital signature.)

**Part II: Supplemental Questions**

Please limit your responses to these questions to a total of **2 pages** (+ additional fundraising documentation).

1. Why are you interested in participating in HNMUN Latin America 2019? What will you contribute to the conference and what do you hope to gain from the experience?
2. Why is it particularly difficult for your school to attend the conference without financial assistance?
3. Please list or explain any Model UN experience your delegation has and describe how you previously have financed conference expenses.
4. What have you done so far in order to raise the money to finance your conference experience? Please include documentation and evidence of all your fundraising efforts in this application. These should include, but are not limited to: any letters or proposals sent out to potential sponsors, all correspondence between your delegation and potential sponsors, notice of all pledged sponsorships, and information on all executed and prospective fundraisers. (Note that demonstrated fundraising effort is a key criterion for our determination of financial assistance and that **no delegation will be awarded financial assistance without evidence of independent fundraising.)**

**Part III: Budget Proposal**

Please provide a detailed budget of your anticipated expenses and sources of funding in **US$**. Each budget should have three basic parts: Projected Expenses, Projected Funding, and Requested Financial Assistance. A sample budget template is attached below.

**Projected Expenses:**

Conference Fees

|  |  |  |  |
| --- | --- | --- | --- |
|  | No. of Units | Registration Cost | Total |
| Delegation/Individual Fee | 1 | $50 | $50 |
| Delegate Fee |  | $80 | $ |
| Faculty Advisor Fee |  | $80 | $ |
| Total Conference Fees | $ |

Hotel Accommodation

HNMUN Latin America 2018 will be recommending a hotel and arranging special prices. In the past, all financial aid recipients have stayed in our conference venue. However, if your delegation would like to explore alternate accommodations, please provide additional details below.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Type of Room | No. of Rooms | Price per Night | Number of nights | Total |
|  |  |  |  |  |
|  |  |  |  |  |
| Total Estimated Hotel Cost |  |

Transportation Costs

Your School will be traveling to Lima from:

You will be traveling by: Air Train Bus Car

Please provide details for travel arrangements:

|  |  |  |  |
| --- | --- | --- | --- |
| Mode of Transport | Cost per traveler | No. of Travelers | Total |
|  |  |  |  |
|  |  |  |  |
| Total Estimated Transport Cost |  |

Please include verifiable sources for hotel and transportation estimates (e.g. correspondence with an airline representative or bus fares provided from a website).

Other Costs

Please detail any other necessary conference-related expenses you expect to incur and explain your calculations and explain why these expenses are necessary to your participation in the conference. Be sure to include your projected expenses for food.

Total other estimated costs =

**Total Projected Expenses** (Conference+Hotel+Transport+Other)**:**

**Projected Funding:**

For each funding category, please provide additional details and documentation.

University funding

We expect your university to be a source of support for your Model UN activities. Please note how much you currently receive from your university and how much more you may be able to receive. If funding comes from specific organizations or departments, please mention this.

Present Amount of University Funding for your Model UN Team =

Present Amount of University Funding for HNMUN-LA 2018 =

Additional University Funding you may receive for HNMUN-LA 2018 =

Sponsorship and grants

Please mention all the sponsorships and grants you expect to receive and make a note of whether each is current (already pledged, donated, or received) or still prospective. Simply copy and paste blank lines if you need more space in the following questions.

Company/Program/Sponsor Amount Sponsored Pledged/Prospective

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Total Current Sponsorships $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Additional Prospective Sponsorships $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fundraising projects

Mention how much you expect to raise from fundraising projects and make note of whether each amount is current (has already been earned) or still prospective. Detailed descriptions of each individual project should be included in your response to supplemental response question #4. Please remember that net amount raised is equal to the amount of money raised from a project minus the amount spent, so that we can accurately assess your financial situation.

Fundraising Project Net Amount Raised Current/Prospective

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Total Current Fundraising Income $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Additional Prospective Income $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Donations

Please mention all the donations you expect to receive and make a note of whether each is current (already pledged, donated, or received) or still prospective.

Donor Donation Current/Prospective

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Total Current Donations $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Additional Prospective Donations $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other

Please describe any additional funding you may have and make a note of whether each is current (already pledged, donated, or received) or still prospective.

Additional Source of Funding Contribution Current/Prospective

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Total Additional Funding $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Additional Prospective Funding $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Evidence and supporting documents for all sources of funding must be provided at the end of your completed application.**

**Total Projected Funding**:

The **Requested Financial Assistance** portion of your budget should include subsidy requests for specific projected expenses. Include an explanation of how specific subsidies may affect your chances of attending HNMUN-LA 2018 and highlight which subsidies would be most essential to your participation in HNMUN-LA 2018.

**Requested Financial Assistance:**

Item (e.g. Hotel and accomodations) Projected Expense Requested Aid

 $ $

$ $

**Total Requested Financial Assistance:**

**Part IV: Additional Documentation**

Please include all additional documentation for fundraising and cost verifications with your application.