



CLUB/ORGANIZATION ADVISOR REIMBURSEMENT FORM

Year: _____

Please complete the information and summary of programs and/or activities, quarterly or yearly, which you, as an advisor, have been responsible for coordinating. This information will be utilized in evaluating the stipend granted for your services as an advisor for the current year. Provisions for this stipend are outlined in Article XVI, Section 5 of the CCS Master Contract in effect as of the date signed below. The stipend is based on special events that offer college-wide participation.

Note: Do not include meetings as they are not considered a program or activity.

Name of employee: _____ EMPLID: _____

Choose your club/organization and budget number:** _____

***For the club/organization and budget number, here is a link to a list – [club/organization and budget numbers.](#)*

Name of years as advisor of group: _____

Program	Date	Student Particip (approx #)	Place