



FUNDING REQUESTS – CHAMPIONSHIP TEAMS/INDIVIDUALS

POLICY

The City of Santa Clara will consider requests for funding assistance to send championship teams/individuals or sports affiliated groups to state, national and international competitions with the following conditions:

Guidelines:

1. The funds requested for the event are in association with a specific state, national or international title (event particulars and copies of supporting materials should be submitted along with the request for funding).
2. Teams or groups should either be from Santa Clara schools or have at least 50% of the students who are residents of the City of Santa Clara;
3. City support is not to exceed 20% of allowable trip expenses and may not exceed \$10,000 per year, per group, subject to availability of funds. Allowable trip expenses include the following: (a) Competition registration; (b) Competition hotel; (c) Transportation; and (d) food expenses only. Allowable trip expenses are for the participating students and coaches/chaperones. The students-to-coach/chaperone ratio is six students to one coach/chaperone. No other miscellaneous expenses are reimbursable. Original receipts are required for all expenditures.
 - a. Competition Registration – City support of 20% for team entry in the competition event itself will be provided. Any ancillary trips, event, entertainment options, etc. included in event registration would not be reimbursable. A copy of the registration material for the competition should be attached with the funding request. Original receipt required to be submitted.
 - b. Competition Hotel – 20% of competition hotel room charges for participating youth and their coaches/ chaperones are allowed. Reimbursement rate will be based on the least expensive competition hotel. A copy of the registration material listing the cost of double (or more) occupant accommodations at the least expensive competition hotel should be attached with the funding request along with the



FUNDING REQUESTS – CHAMPIONSHIP TEAMS/INDIVIDUALS (cont.)

hotel bill. Note: Other hotel incidentals, such as room service, in-room mini bars, telephone calls, movies, parking, etc. added to the hotel bill are not reimbursable.

- c. Transportation – The most economical transportation should be used to and from the competition. In case of air transportation, reservations (and 20% reimbursement) are to be on the basis of advance-purchase economy class airfare. Original receipts required to be submitted.
- d. Per Diem Food Expense - The meal reimbursement rate of \$11 per participant/per day or 20% of meal costs, whichever is lower, will be provided. Alcohol is not a reimbursable expense.

The City will make payment pursuant to an agreement between the City and the team/individual attending the competition with income and allowable expenses subject to audit.

PROCEDURE

Application process:

1. Submit applications to the City Manager's Office, 1500 Warburton Avenue, Santa Clara, CA 95050 (see attached).
2. Applications must be filled out entirely and all supplemental information requested must be submitted with the application to be considered complete.
3. Staff of the City Manager's Office will review applications received and recommendations will be forwarded to the City Council for final approval generally within two weeks of receipt. Applicants will be notified of the status of their application and the date and time of the Council meeting.
4. Upon approval by Council, selected applicants will be invited to meet with staff to enter into a contract with the City. Funding is treated as a contract for service.



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Audit process:

1. Upon trip completion original receipts must be submitted within 30 days to substantiate City funds allocated for event.
2. If City funds cannot be fully justified based on the guidelines set forth, the group will be responsible for an appropriate reimbursement of City-provided funding.
3. Request for funding of allowable expenses shall be submitted to the Senior Staff Aide, City Manager's Office. All allowed costs are reimbursed or paid only upon the presentation of original receipts or suitable evidence of payment for the cost by the teams/individuals. Call City Manager's Office at 615-2210 for information

***Reference:
and 5/24/05***

City Council-approved policy dated 5/25/93, as revised 4/22/97

Application for Funding Assistance (attached)



City of Santa Clara
Application for Funding Assistance through the
Championship Team Trust Fund
Organization Request

1. ORGANIZATION INFORMATION

Name of Group or Organization

Address

Contact Person

Telephone (Day) _____ Evening _____

Describe Purpose of your organization _____

How long has your organization been providing youth activities in Santa Clara? _____

2. ACTIVITY/PROGRAM INFORMATION

Name of State, National or International title that you/your group will be competing for

Amount you are requesting \$ _____

Summary of proposed activity/project/program (include specifically where/how City funds would be used)

Identify other organizations who have provided partial funding for this activity

City of Santa Clara
**Application for Funding Assistance through the
Championship Team Trust Fund
Organization Request**

Who is predominantly served by this program?

How will the funding assistance enhance your existing program?

3. **FUNDING INFORMATION**

Total cost of participation in this event/contest/competition (including above amount requested)

How many students and coaches/chaperones will be participating?

Students _____

Coach/Chaperones _____

4. **BUDGET SUMMARY OF TRAVEL EXPENSES**

Travel Destination

Tournament/Competition Dates

Transportation:

Airline _____ \$ _____

Car (rental and/or own) _____ \$ _____

Bus _____ \$ _____

Train _____ \$ _____

Other (describe) _____ \$ _____

5. **REGISTRATION/TOURNAMENT/ENTRY FEE**

Cost for registration _____ \$ _____

6. FOOD

Number of Days _____ \$ _____

7. LODGING

Hotel _____ \$ _____

Motel _____ \$ _____

Other (describe) _____ \$ _____

TOTAL TRAVEL EXPENSES: \$ _____

This application and the information contained herein are true, correct and complete, to the best of my knowledge.

Agency Name

Title _____

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