

SIF POST-INITIATIVE REPORT FORM –UPDATED SEPTEMBER 2018**A. Overview & Contact Information**

Name of Initiative		
Date of Initiative		
Submission Date of Post-Initiative Form (Note: 30 days following project completion)		
Total Amount Approved by SIF (\$)		
Total Amount Advanced by SIF (\$)		
Balance Submitted to SIF for Reimbursement (\$)		
Full Name of Primary Contact (this must be the same primary contact as the initial application)		
Email		
Telephone Number		
Which other funding bodies did you receive funding for this initiative?	<input type="checkbox"/> FAS DSIF <input type="checkbox"/> HH GIF <input type="checkbox"/> UTSU <input type="checkbox"/> Other:	
SIF committee will NOT fund initiatives that does not reflect its Terms of Reference, which include an initiative that:		
<ul style="list-style-type: none"> • Is for the purpose of fundraising • Is held outside of the University of Toronto Community, i.e. an application is submitted by a University of Toronto St. George student on behalf of his/her community based organization • Involves personal expenses • Includes alcohol-related expenses • Is capital in nature, unless the capital is used for the formation of a new student club • Is for general operating expenses of student clubs or organizations, i.e. SIF is intended for projects/events/activities • Is from an applicant who has not submitted the post-project reports for previous SIF-funded projects • Excludes any student or student group from participation • Requires event planning and risk management practices, and these have not been applied 		
<input type="checkbox"/> By checking this box, I confirm that any invoices, itemized receipts, or supporting document does not violate SIF Terms of Reference as listed above.		

B. Reconciliation

Enter full legal name/organization this amount is payable to:	
Department or Group Name (if applicable)	

Contact Number (if applicable)	
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Check **any or all of the following documents** that are attached to form indicating expenses incurred for SIF reimbursement ONLY:

- Invoices
- Original Itemized receipts* (ie. Showing detailed items purchased)
- Charges
- Bills
- Other – please specify _____

*Note: receipts will not be returned

Check **any or all of the following documents** that are attached to form as proof of payment (unless paid cash) for expenses incurred:

- Credit Card Receipts (note: this is not the itemized receipt)
- Credit Card Statements showing the name of the cardholder (i.e Visa or Mastercard bill –all non-relevant items may be blacked out for privacy)
- Bank Account Statements showing the name of the cardholder (i.e for debit purchases – all non-relevant items may be blacked out for privacy)

The following will **not** be accepted as proof of purchase(s):

- × Documents that list an estimate, quote, price list or tender
- × Scanned or photocopied receipts (must be original and itemized)

Note: It takes approximately 35 days for a cheque to be provided after this post-initiative form is submitted.

C. Updated Budget Summary

Revenue	
Source	Amount
Total Revenue	

Expenses – Please list each receipt, do not group receipts together. Only list SIF expenses. Receipts will not be returned

Receipts (where is the receipt from?)	Notes (what was purchased?)	Amount
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Total Expenses

Balance Difference

Revenue

Expenses

Difference

Amount submitted to SIF for reimbursement

D. Event Documentation

The SIF Committee requires documentation you may have for the funded initiative to be attached to this post-initiative report.

These documents **must** include:

- Written summary/reflection (250 words max.)

And may also include:

- Pictures
- Testimonials
- Press Releases
- Anything you think the SIF committee can view!

Written summary/reflection (250 words max.)

E. Digital Signatures

Primary Contact Full Name

Secondary Contact Full Name