



ASSOCIATED STUDENT GOVERNMENT

STIPEND REQUEST FORM

Name of Student: _____ Date of Submission: _____

The Associated Student Government constitution and bylaws allows ASG officers who attend ASG meetings and shared governance committee, as outlined in governing documents to receive a monthly stipend to be paid from the Student Representation Fee (for the ASG officers)

Eligibility:

Officers and senators who have verified committee attendance and documentation confirming the fulfillment of their responsibilities may request and receive the period stipend automatically by requesting a check in the standard check request form procedure currently in place. The minimum documentation required for

A. ASG Officers:

- Proof of Senate and Committee attendance
- Office hours as posted

Stipend Payment Limitations for ASG Officers:

- ASG Officers must present their requests before the last day of the semester.
- The payment of stipends will be waived for the fall semester if by October 1 less than 25% of the students' population paid for the LACC ASG membership fee. Also, the payment of stipends will be waived for the spring semester if by April 1 less than 25% of the students' population paid for the LACC ASG member ship fee.

Standards of Compensation:

B. ASG Officers

- The LACC ASG Executive Officers may request a \$400 stipend every 4 to 5 semester weeks upon proof of participation during such 4 to 5 semester weeks to at least five (5) LACC ASG Senate or committee meetings and at least one (1) campus/shared governance committee. The maximum number of stipends per person per semester is three (3).
- The LACC ASG Senators may request a \$200 stipend every 4 to 5 semester weeks upon proof of participation during such 4 to 5 semester weeks to at least three (3) LACC ASG Senate or committee meetings and at least one (1) campus/shared governance committee. The maximum number of stipends per person per semester is three (3).

Failure to complete responsibilities:

- a.) Forfeiture of stipend
- b.) Removal from the committee appointment
- c.) Removal from ASG

Complete the section below with supporting evidence.

Name: _____ Position: _____

Name of Meeting/Committee	Date of Attendance	Supporting evidence of attendance
		<input type="checkbox"/> Attached meeting agenda and minutes <input type="checkbox"/> Committee Chairperson signature*: _____ <input type="checkbox"/> Dean of Student Life signature*: _____
		<input type="checkbox"/> Attached meeting agenda and minutes <input type="checkbox"/> Committee Chairperson signature*: _____ <input type="checkbox"/> Dean of Student Life signature*: _____

* Include printed name, date signed, and signature. By signing, you are verifying the attendance and active participation of the abovenamed student at the meeting specified above.