



Office of the Dean

If funding is available, review of support requests will be arranged by the Associate Dean for Research in the College of Arts & Sciences. The requests must be related to research and scholarship and be one-time in nature.

Requestor Information

Department/Program _____ Date: _____
Name & Phone Number _____
Email Address _____

Project Information

Amount requested from A&S \$ _____
Project/Proposal Name _____
Project Beginning Date _____ Project End Date _____
Total Project Cost \$ _____ Index to transfer funds _____
Are other departments/programs contributing funds to this project? Yes or No
If yes, please list department(s) and amount(s) below.

Multiple horizontal lines for listing contributing departments and amounts.

Please provide a one page attachment about the project and the need for funding.

Signature Acknowledging Request

Requestor: _____ Approved Denied
Department Chair: _____ [] []
College Approval: _____ [] []

ROUTING

Step 1 Initiator Step 2 Dept. Chair Step 3 Dean's office Step 4 College Finance Office Step 5 File

COLLEGE OFFICE ONLY: DOCUMENT FINALIZATION

Date: _____ JV # _____ Amount Paid \$ _____
Index _____ Index _____ Preparer's _____
To: _____ From: _____ Initials _____