

**College of Liberal Arts and Social Sciences
Request for Funding Form**

Date: _____

Name: _____

Department: _____

Fiscal Year of the Request: _____

Total Project / Trip Cost: \$ _____

Amount Requested from CLASS Dean's Office: \$ _____

Date(s) of Event/Travel/Deadline for Submission of Funds: _____

Reason For the Request:

The Request will Benefit:

Account Number(s) for the Budget Transfer:

Note: A budget transfer will be processed after receiving documentation of payments

Dept. Contribution \$ _____
Chair/Director

Other Contribution \$ _____
Department

Dean's Contribution \$ _____
Dean