

HONORS COLLEGE

FUNDING REQUEST FORM

As a service to our students and upon request, the Elliott T. Bowers Honors College supports students in their academic endeavors. This support must be used toward the requested event or research. Students must be in good standing with the Honors College to receive funding.

Request must be received a month in advance of needed date.

Student Information:

Name: _____ SAM ID: _____

Phone Number: _____ E-mail: _____

Address: _____ City: _____ State: _____ Zip: _____

Funding Request Information:

Funding for: Study Abroad Conference Thesis Support Other: _____

Semester of Event: Fall Spring Summer 20____ Date of Travel: ____/____/____

Description of Event:

If you are traveling for research or presentation purposes, please state which department you will be under.

Event Location:

Amounts received/expected from other sources:

Name:

Amount:

_____ \$ _____.

_____ \$ _____.

_____ \$ _____.

Estimated total cost: \$ _____ Amount Requesting: \$ _____

Date funding needed: ____/____/____

If you are approved for funding, you will be notified by the Honors College.

Student Signature: _____

Date: _____

Advisor (printed name): _____

Email: _____

Advisor Signature: _____

Date: _____

For Honors Office Use:

Status: _____ GPA: _____

Approved: Yes No Amount: \$ _____ Scholarship

Initial: _____ Date: ____/____/____

Notified

Awarded