

CUFCT FACULTY FUNDING REQUEST

Albert Nerken School of Engineering

Please send completed requests to Beth Slack via email (<u>beth.slack@cooper.edu</u>) or drop off to her in the Dean's Office (41 Cooper Square, room 204).

Name:	Department:			
Email:				
Name and description of activity (attach information sho	eet or flye	r if applicable):		
Website of activity:				
Date(s) of activity:	Location	of activity:		
Are you presenting at this activity? Yes	No			
If yes, what are you presenting?				
Amount of Funding Requested:				
Breakdown of Expenses:				
(Check all that apply.)				
I would like the Dean's Office to purchase item	-	ehalf.		
I will submit receipts for reimbursement after the	ne event.			
I have applied for funding from other sources: Yes		No		
If yes, from where?				
Do you have startup funds? Yes No				
Are you working with students for this activity?	Yes	No		
Will students be traveling with you for this activity?	Yes	No		
If yes, will they be applying to the Dean's Office for sup	pport?	Yes	No	
Faculty Signature:		1	Date:	