



Office of International Programs' Association Funding Request Form

Organization Name:	Contact Person:
E-mail Address:	Phone #:
Address/P.O. Box #:	Fed. I.D. # / Org #:

Program/Event	Title:	
Date:	Time:	Location:
Money requested will be used for:		Amount requested:
<input type="checkbox"/> Publicity <input type="checkbox"/> Transportation <input type="checkbox"/> Equipment <input type="checkbox"/> Accommodation <input type="checkbox"/> Honorarium		TOTAL funding for event:

What is your organization's mission?

How does your event support or illuminate the international character of the university and its students?

Aside from oIP funding support, what other organizations or departments have provided funding for this event?

Amount Contributed:	Organization/Department:
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

What additional information can you provide us relative to our consideration of providing your organization support:

By signing this form, your organization agrees to include oIP's sponsorship by including the oIP logo on all of your promotional pieces, should you be granted funding.

Advisor's signature: _____ **Date:** _____

Student Leader's signature: _____

Office Use ONLY:	Date received: _____	Amount Awarded: _____
oIP Approval: _____		