

## College of Engineering Funding Support Request Form

<b>Name of Organization:</b>	
<b>Faculty Advisor:</b> (Signature Required)	
<b>Name of Requestor:</b> Mr. or Ms. (circle one)	
<b>Title of Requestor:</b> (Office Held in Organization)	
<b>Local Address:</b>	
<b>Email Address:</b>	
<b>Phone Number:</b>	
<b>Advisor Name:</b>	
<b>Date Submitted:</b>	
<b>Activity Title:</b>	
<b>Activity Date(s):</b>	
<b>Activity Registration Deadline (if applicable):</b>	
<b><u>Activity Description:</u></b> (What are you seeking funding for? Attach additional sheet if necessary.)	
<b><u>Activity Objective:</u></b> (What is the objective of attending or holding this event? Attach additional sheet if necessary.)	

**Activity Participants and/or Intended Audience:** (Attach additional sheet if necessary.)

**Total Budget:**

*(Attach itemized budget including departmental or external income sources. Include transportation costs/arrangements.)*

\$ \_\_\_\_\_

**Total Amount Requested from the COE**

\$ \_\_\_\_\_

Please return completed form to Mrs. Terrie Kalesse, Office of Academic Advisement,  
Student Development & Support, 141 P.S. DuPont Hall or fax it to 831-7399.  
If you need assistance, please contact Mrs. Kalesse directly at 831-0836 or [terrie@udel.edu](mailto:terrie@udel.edu)

***NOTE: Please allow two weeks for a response.***

**FOR OFFICIAL USE ONLY**

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Date submitted for administrative review: \_\_\_\_\_

Amount approved: \_\_\_\_\_ Date approved: \_\_\_\_\_

Organization notified: \_\_\_\_\_

Receipts received: \_\_\_\_\_

Admin. Purpose Code: ENGR \_\_\_\_\_ - \_\_\_\_\_ Student Group Purpose Code: STPG \_\_\_\_\_ - \_\_\_\_\_

JV processed (amount/date): \_\_\_\_\_

Other (if applicable):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_