COLLEGE OF BUSINESS REQUEST FOR FUNDS FORM

Date: __________________________

Name of Individual Requesting the Item: ______________________

Department: ____________ CLBA ____________

Describe the purchase:

________________________________________________________________________

Explain how this item would help in the teaching or productivity of the user:

________________________________________________________________________

Estimated Cost: $ ____________

(Attach detailed information of the purchase and vendor.)

Is this from a college grant? ☐ Yes ☐ No

Account #: __________________________ Title: __________________________

Signature: __________________________

APPROVALS:

Department Chair: ☐ Recommend Approval ☐ Do Not Recommend Approval

Signature: __________________________ Date: __________________________

Dean John Gamble: ☐ Approve ☐ Do Not Approve

Signature: __________________________ Date: __________________________

Comments or Special Instruction: