Funding Request Form- Center for Leadership, Academic and Student Success (Title V)

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| --- | --- | --- | --- |
| Program/Event title: |  |  |  |
| Date of Event/Purchase: | Click or tap to enter a date. | Date of Submission: | Click or tap to enter a date. |
| Contact name: |  | Contact email: |  |
| Phone number: |  | Department: |  |

## Instructions:

## What activity code does this request fall under? If you do not know please leave blank.

## Choose an item.

1. **Attach a description of the goals, objectives, timelines, target population and the benefits to department and LSC-Tomball**

Click or tap here to enter text.

1. **Provide a complete budget for the project with cost of items such as: personnel, equipment, materials, printing, postage, space, and travel. Include other sources and amounts of revenue including above, ticket sales, sponsorships, etc**

|  |  |  |
| --- | --- | --- |
| **Quantity** | **Item** | **Cost** |
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|  |  |  |

**Total:** Click or tap here to enter text.

1. **How does this event relate to Title V?**

Click or tap here to enter text.

For questions and administrative support, contact:

Katherine Hernandez

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**For office use only**

Project funded:  Yes  No Stipulations: Click or tap here to enter text.

Funded Amount: $Click or tap here to enter text.