

## Student Funding Request of the Dean

Download and **complete sections A and B** in the fillable PDF using **Adobe Acrobat**.

All requests must be submitted in a timely manner.

### A. Applicant Information

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Print Name \_\_\_\_\_

RIT Email \_\_\_\_\_ Phone No. \_\_\_\_\_

School/Program \_\_\_\_\_

1. Provide a detailed rationale for the requested funds.

2. How does this support your academic needs?

3. What specific outcomes do you expect to see?

4. Are you receiving any additional funding outside of the College of Art and Design?  Yes  No  
*If yes, please provide funding source and amounts.*

## B. Budget Estimate

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All budget figures must be well-researched, documented, and competitively priced.

▪ _____	\$ _____
▪ _____	\$ _____
▪ _____	\$ _____
<b>Subtract any additional funding received outside of your School/program</b>	<b>- \$ _____</b>
<b>Funding Request Total</b>	<b>\$ _____</b>

## C. To be completed by the School Director

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Check one:

<input type="checkbox"/> Yes, I support this request and: <input type="checkbox"/> fully fund    or <input type="checkbox"/> partially fund	\$ _____
<input type="checkbox"/> Yes, I support this request, but have no funding available.	\$ 0.00
<input type="checkbox"/> I do not support this request. Provide a rationale.	\$ 0.00

**Funding Request Remaining Balance**

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

\_\_\_\_\_  
*School Director/Supervisor Signature*

## D. To be completed by the College's Director of Advancement/Alumni Relations

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*If additional funding is still requested and the project furthers the strategic plan of the School or College, the School Director should engage the college's director of advancement and/or the director of alumni relations for additional funding.*

**Additional Amount Funded**

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

\_\_\_\_\_  
*CAD Director of Advancement/Director of CAD Alumni Relations Signature*

*If additional funding is still requested after consultation with development and alumni relations please submit this completed form to the Dean's office (Michele Washburn) for the Dean's review.*

## E. To be completed by the Dean

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**Additional Amount Funded by the Dean**

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

\_\_\_\_\_  
*Dean's Signature*

*Please submit this document along with expenses to your School's Senior Staff Assistant.*

Revised 09/20/2021