



# CHAO CENTER FOR ASIAN STUDIES FUNDING REQUEST FORM

This form is to be used for ALL requests for funds from the Chao Center's faculty support budget including, but limited to: equipment, partial support for workshops or lectures, travel over and above the normal departmental budget, student assistants, part-time faculty support, etc. Do not consider funding approved or in place until you receive a signed copy of this form.

**Note: Unused funding must be returned to the Chao Center for Asian Studies immediately upon the project completion.**

Date of Request: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Department: \_\_\_\_\_

**Amount of funding requested from the Chao Center:**

**Transfer to Fund and Org (if applicable):**

**OTHER FUNDING SOURCES, including funds from the department making the request:**

Department	Amount	Fund	Org	Confirmed
_____	_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
_____	_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
_____	_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>

**EXTERNAL FUNDING SOURCES (if applicable):**

Agency or Organization	Amount	Confirmed
_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>

**Total amount requested from all sources:**

Project date(s): \_\_\_\_\_ Begin date: \_\_\_\_\_ End date: \_\_\_\_\_ Fiscal Year: \_\_\_\_\_

Project description or funding purpose (please be brief but thorough; attach supplemental documentation if appropriate).  
\_\_\_\_\_

Detailed budget (provide attachment(s) as needed):

Item	Amount	Total
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

APPROVED

DENIED

ADDITIONAL INFORMATION REQUIRED