**Supplemental Funding Request**

To request supplemental funding, please submit this completed form, along with supporting documentation, to: Barbara Moses, Associate Vice Chancellor, Budget and Resource Management: bamoses@nscu.edu

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| **Title of Funding Request:** |
| **Brief Summary of Funding Request:***In 2-4 sentences, describe the funding request, anticipated benefits and/or problems mitigated. Cite amount of funding request, timeframe and barriers to other funding sources.* |
| **Funding Amount:** *Please attach an itemized spreadsheet with detailed line items such as salary & benefits.* |
| **Is this a one-time or continuing funding request? If continuing, please specify timeframe:** |
| **Funding Options:***Identify funds to be contributed by the requesting and/or other entities. Address why these funding sources do not sufficiently cover the request.* |
| **State risk, should funding not fully nor timely occur:** |
| **Provide additional comments in support of the request:** |
| **Main Contact (Name, Email and Phone Number):** |
| **Department and OUC (6-digit):** |
| **Dean/AVC Approval (Name, initials and date):** |
| **Date Submitted:** |