SIERRA COLLEGE PATRONS

FUNDING APPLICATION

SUBMISSION DEADLINES: FALL - SEPTEMBER 30 SPRING - FEBRUARY 28

1.	Name of Department:	
2.	Name of Applicant:	
3.	E-Mail for contact	
3.	Purpose of Request:	Amount:
	Justification (Please include in your justification whether or no annual proposed budget for your department and whether or not llege.)	
<u>Fund</u>	ing Conditions:	
	recipient will be reimbursed for the actual amount of the item request. Reimbursement will be based on the submission of a vendor inv	<u> </u>
expei must	anditure of the funds must be made within 90 days from the Patron anded within that timeframe will revert to the Patrons. Any extense be submitted in writing prior to the expiration of the 90-day pension.	nsion of time for expenditure
5. Si	gnature of Applicant:	Date:
6. Si	gnature of Dean of Division:	Date:
PAT	RONS USE ONLY	
Date	Received Approved Disapproved	Amount
Patro	ons Representative	Date
Com	ments	