

Office and Resource Request

Name: _____

Requested Dates: _____

College/School/Unit: _____

Address:

Phone # _____ E-mail: _____

Unit Administrative Contact:

Name: _____ Phone: _____

Project Description (Attach description if more space is needed)

Please indicate option 1, 2, or 3 and any special needs and/or other information relevant to your project including resources--human and material--you will need. Also, if you are applying for a scholarship up to \$2000 to match with your units' support of \$1000 (or 1 credit hour), please indicate this.

Dean's Signature _____ Date _____

Dept. Chair's Signature _____ Date _____

Fax this form to 330-672-3815 by the dates listed below. If you have any questions, please call Jody Khlem at 330-672-7892.

Deadline for submission of application: August 15

Please Note: Applications may be accepted throughout the academic year, depending on the nature of request, funding and space available.

Your Signature _____ Date _____