

COVID-19 Recovery Block Grant

DATE

DATE NEEDED

REQUESTOR NAME

TELEPHONE

EMAIL

DEPARTMENT / PROGRAM NAME

VENDOR NAME

DELIVER TO (ROOM, BLDG #)

SUBMIT STUDENT RETENTION & ENROLLMENT Funding Request with:

- REQUISITION REQUEST: REQUISITION FORM, QUOTE OR INVOICE
- REIMBURSEMENT REQUEST: REVOLVING CASH FUND REQUEST AND RECEIPTS
- PAYROLL REQUEST: PASS OR NANCE SHEET WITH PROJECTION SHEET

JUSTIFICATION / REASON FOR REQUEST

SUPPLIES, SOFTWARE, MARKETING, SERVICE (guest speaker), STUDENT ACTIVITIES REIMBURSEMENT REQUEST

PROVIDE A STATEMENT EXPLAINING THE PURPOSE FOR THE PURCHASE AND HOW IT RELEATES TO STUDENT RETENTION & ENROLLMENT FUNDS (Provide timeframe if software or services):

PAYROLL REQUEST

PROVIDE A STATEMENT EXPLAINING THE PURPOSE OF ASSIGNMENT AND HOW IT RELEATES TO STUDENT RETENTION AND ENROLLMENT FUNDS (Provide Name of Employee, time-frame, Department):

APPROVAL:

VICE PRESIDENT

DATE