



FUNDING REQUEST FORM

Thank you for submitting a funding request to Fraternity and Sorority Life. Possible options for funding include (but are not limited to) **charter day celebrations, development opportunities like conferences, philanthropies, chapter events, room reservations or setup fees, speakers, and box offices fees.** Requesting funding **does not guarantee** that you will receive funds, or that there are funds available for use, but is the first step in exploring your options. **Keep in mind (1) the deadline for submitting this form is 30 days prior to the start of the event, (2) Funding is limited so priority will be given to those who submit earlier each semester.** If you have any questions regarding funding or this form, please contact Anna Lehn, Associate Director, Student Engagement, anna.lehnen@duke.edu. Please submit completed forms to greek@duke.edu.

CHAPTER INFORMATION

Chapter Name: _____

President: _____ Phone Number: _____

Signature: _____ Email: _____

Student to be contacted regarding funding details in addition to the chapter president

Name: _____ Email: _____

Funding Purpose: _____

Date and Location: _____

Chapter Advisor Signature: _____

I have reviewed and approve to be submitted for consideration.

On a separate page, please provide a brief explanation of how this funding will benefit your chapter, your council, the fraternity and sorority life community, and/or the Duke community.

ADVISOR REVIEW

Name: _____ Signature: _____

Phone: _____ Email: _____

Approved: Yes No Need more information

EVENT FUNDING	CHAPTER FUNDS*	REQUESTED FUNDS
Space: _____	\$ _____	\$ _____
Food: _____	\$ _____	\$ _____
Decorations: _____	\$ _____	\$ _____
Marketing: _____	\$ _____	\$ _____
Speaker or Services: _____	\$ _____	\$ _____
Other Expenses: _____	\$ _____	\$ _____
Total: _____	\$ _____	\$ _____

TRAVEL FUNDING	CHAPTER FUNDS*	REQUESTED FUNDS
Registration: _____	\$ _____	\$ _____
Transportation: _____	\$ _____	\$ _____
Lodging: _____	\$ _____	\$ _____
Meals: _____	\$ _____	\$ _____
Incidentals: _____	\$ _____	\$ _____
Other Expenses: _____	\$ _____	\$ _____
Total: _____	\$ _____	\$ _____

*If applicable. This includes, but is not limited to funding received from Duke departments, sponsorships, donations, fundraisers, and/or member contributions.

If you are requesting funding for another purpose, please outline the funding categories, what the chapter will contribute (if applicable), and requested funds.

IMPORTANT: Be as exact as possible when outlining expenses and provide evidence. For example, for travel funding, look up and attach flight itinerary's, registration fees, and hotel rates.