



UTC Club Sports Supplemental Funding Request

Staff use only

Decision: _____

Staff name: _____ Date: _____

Funding request form must be submitted at least 14 days prior to event or desired purchase date. Any requests submitted after event or purchase will not be considered for supplemental funding.

Club Sport Name: _____

Name/Title of Person Requesting: _____

Name of the event/type of purchase: _____

Date(s) of the event (*if applicable*): _____

Location(s) of the event (*if applicable*): _____

Short description & additional information: _____

Itemization of EXACT costs for event/purchase:

Total costs of event/purchase: \$ _____

Itemization of EXACT amount of self-generated funds used towards purchase, including dates & amounts received from fundraisers:

Self-Generated Funds to be dedicated to event/purchase: _____

Total Amount Requested: \$ _____

Total Costs - Self-generated funds = TOTAL AMOUNT requested for supplemental funding.