



COURSE-RELATED GUEST LECTURE & FUNDING REQUEST

Instructor: _____

Semester: _____

Course Number and Title: _____

Date of Request: _____

Brief Description of Request:

Amount Requested: _____

Approval by Director: _____

Amount Approved (if other than amount requested): _____

Budget Source: _____

*****Signature is required for any additional funding sources (for example, research accounts)*****

I commit ____ from an additional funding source for this course-related request.

Funding Source: _____

Signature: _____

Print Name: _____