

# Grant Request Form

## Section 1 - Grant Information

Grant Name: _____		Request Type: <input type="checkbox"/> New <input type="checkbox"/> Update								
Academic Year: _____	Grant Funded Amt: _____	Max Annual Recipient Amt: _____								
Eligible Career(s): <input type="checkbox"/> UGRD <input type="checkbox"/> PBAC	Instructions: _____									
Refundable: <input type="checkbox"/> Yes <input type="checkbox"/> No	_____									
Need Based: <input type="checkbox"/> Yes <input type="checkbox"/> No	_____									
Full-time: <input type="checkbox"/> Yes <input type="checkbox"/> No	_____									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td rowspan="2">Short Description:</td> <td><input type="checkbox"/> Internal</td> <td><input type="checkbox"/> Endowment</td> <td><input type="checkbox"/> External</td> </tr> <tr> <td><input type="checkbox"/> AGIA</td> <td><input type="checkbox"/> SPA</td> <td></td> </tr> </table>				Short Description:	<input type="checkbox"/> Internal	<input type="checkbox"/> Endowment	<input type="checkbox"/> External	<input type="checkbox"/> AGIA	<input type="checkbox"/> SPA	
Short Description:	<input type="checkbox"/> Internal	<input type="checkbox"/> Endowment	<input type="checkbox"/> External							
	<input type="checkbox"/> AGIA	<input type="checkbox"/> SPA								
Funding Source: <input type="checkbox"/> BKCMP <input type="checkbox"/> BKFDN	Fund Code: _____	Dept #: _____	Project #: _____							
<input type="checkbox"/> BKASI <input type="checkbox"/> BKSPA	Acct #: _____	Program #: _____	Class #: _____							
Principal Investigator - Printed Name _____	Principal Investigator - Signature _____	Date _____								
Program Director - Printed Name _____	Program Director - Signature _____	Date _____								

## Section 2 - Grants, Research & Sponsored Programs (GRaSP Post-Award - Dobry Bldg.)

<i>Department Stamp</i>	Comments: _____		
	_____		
	Authorized Approval - Printed Name _____	Authorized Approval - Signature _____	Date _____

## Section 3 - Financial Aid & Scholarships

<i>Department Stamp</i>	Item Type #: _____		Item Type Name: _____
	_____		
	Authorized Approval - Printed Name _____	Authorized Approval - Signature _____	Date _____

## Section 4 - Student Financial Services

<i>Department Stamp</i>	Set Up Financials: <input type="checkbox"/> Comments: _____		
	_____		
	Authorized Approval - Printed Name _____	Authorized Approval - Signature _____	Date _____

## Section 5 - Financial Aid & Scholarships

<i>Department Stamp</i>	<input type="checkbox"/> Add/Update FA Item Type		<input type="checkbox"/> Add/Update Disb Item Type Rules
	<input type="checkbox"/> Loan Only: Create loan type, fee, & rebate %		
	Authorized Approval - Printed Name _____	Authorized Approval - Signature _____	Date _____

## Section 6 - Financial Aid & Scholarships

<i>Department Stamp</i>	<input type="checkbox"/> Add/Update Fiscal Item Type Amounts		
	_____		
	Authorized Approval - Printed Name _____	Authorized Approval - Signature _____	Date _____

## Section 7 - Grants, Research & Sponsored Programs (GRaSP Post-Award - Dobry Bldg.)

<i>Department Stamp</i>	Comments: _____		
	_____		
	Authorized Approval - Printed Name _____	Authorized Approval - Signature _____	Date _____