SMITH COLLEGE STUDENT SPECIAL FUNDING APPLICATION

Funding is for <u>currently-enrolled</u>, <u>undergraduate</u> students only. This application must be submitted on paper, with appropriate attachments, to the Dean of the College's office, College Hall 203. <u>Incomplete</u> applications will not be considered. Questions? Contact Susan Zachary at szachary@smith.edu.

?? IS THIS THE RIGHT FORM FOR ME ??					
Are you applying for funding <i>as an individual</i>	YES! – use this form				
student for an event within the United States					
that is NOT for credit?					
Are you applying on behalf of a student org?	<i>NO</i> – use Student Activities Request for Event				
	Funding form available at Campus Center Room 106				
Are you looking for help with textbooks?	<i>NO</i> – apply to the Student Aid Society at				
	www.smith.edu/classdeans/				
Are you applying for funding for international	NO - apply for an International Experience Grant at				
travel? (includes Canada and US territories)	www.smith.edu/studyabroad/ or to the Student Aid				
	Society at www.smith.edu/classdeans/				

<u>IF YOU HAVE DETERMINED THIS IS THE CORRECT FORM FOR YOU, PLEASE FOLLOW</u> THESE INSTRUCTIONS:

- 1. Complete and sign the attached application, including checklist and detailed budget (travel costs, registration, supplies, etc.). Applications without a budget will not be considered.
- 2. Attach official information describing the event you wish to attend, showing the dates and cost.
- 3. Attach a brief proposal (no more than one page) for your participation in the event, including description of the program and how it will benefit your academic career and/or the Smith community at large.
- 4. Attach a brief statement from a faculty member supporting your participation in the event.
- 5. Submit all materials to the Dean of the College office, College Hall 203.
- 6. Once your application has been reviewed, you will be notified of the amount of approved funding (in many cases, you will *not* receive the full amount requested).
- 7. To receive reimbursement, you must submit **original** receipts and a completed Student Expense Report (attached) to the Dean of the College office; once approved, funding will be processed.

FUNDS COVERED BY THIS FORM INCLUDE:

FUND	FUNDS AVAILABLE FOR	NOTES
President	assistance with expenses for students	students will be funded only ONCE in their
	to attend academic conferences	time at Smith; maximum grant \$350.
Ada Comstock	assist with expenses for travel to	available to Ada Comstock Scholars only
Scholars	interviews, conferences, etc.	
Program		
Chapel	travel to conferences/retreats/special	amount varies.
	programs related to religion, ethics	
	or community/public service	
Dean of the	assist with travel to conferences,	maximum total of \$100 during time at
College	special studies work, miscellaneous	Smith.
Institutional	assistance with activities to nurture a	amount varies.
Diversity	diverse campus community	
Rothchild	special studies projects	one-time funding only; students must be of
Fund		traditional age and on financial aid;
		amount varies.

STUDENT SPECIAL FUNDING APPLICATION - CHECKLIST

	Your Name:	Class Year:			
Please $\sqrt{\text{check all the way to the bottom:}}$					
☐ I have read and understand the instructions.					
☐ I am a currently-enrolled Smith undergraduate and w graduation	rill complete my proposed activity befo	re			
My project/event takes place in the United States					
\square I will NOT miss any classes in order to participate in OR	my proposed activity				
☐ I WILL miss class, and have informed my instructor(s) and arranged to make up any missed work.					
☐ I have completed the detailed budget form and have a	attached it to my application				
☐ I have attached a brief statement about my proposal and my background that equips me to undertake it, as well as the reason I am seeking funding.					
☐ I have attached a statement from a faculty member/ad	dviser supporting my participation in th	nis event.			
☐ I have attached a cheap Internet airfare quote (if airfa	are travel is part of the proposal).				
☐ I have attached an official publication describing the (website materials acceptable).	program/project, that includes the date	s and the cost			
☐ I understand that I must bring original receipts and a College office in order to receive reimbursement (not		ne Dean of the			
☐ I understand that if my expenses are <i>less</i> than the approved amount.	proved funding amount, I will be reimb	ursed only for			
My signature certifies that the information provided and submitted.	the answers to all questions are accura	te on all forms			
Signed (Original signature required)	Date				

CHECK THE FUND(S) YOU WISH TO APPLY FOR (see previous page for brief descriptions and restrictions):

1	FUND
	President
	Ada Comstock Scholars Program
	Chapel
	Dean of the College
	Institutional Diversity
	Rothchild Fund

STUDENT SPECIAL FUNDING APPLICATION

Please complete all sections.

YOUR NAME:	YOUR CLASS YEAR:					
SMITH ID #:	CAMPUS BOX:					
YOUR SMITH email address: Title of the program/project for which you are requesting funding:						
Dates: From:	To:		Total n	umber of days :		
Does this include da	ys on which y	ou have clas	ses schedul	ed? Yes No		
Location of event :						
Net funds requested	d: \$		(Use figu	re from 4(0) on budget sheet on next page.)	
Please check: This project IS/is NOT for academic credit. I have completed the detailed budget form. I have attached a statement of support from a faculty member/adviser. Do you have direct deposit arrangements with the controller? Yes No I understand that on completion of the project/event, I must provide original receipts for expenses incurred and submit them with the completed Student Expense Report to Susan Zachary in the Dean of the College office, College Hall 203. Student's signature Date FOR OFFICE USE ONLY:						
Office supplying funds:	Approved by:	Fund Source	Amount	Charge # (to be completed by DOC office once finalized)		
Tunus.	by.	Source	Amount	once once manzeu	- -	
					=	
To Controller: Please arrange for direct deposit/prepare a check in the amount of \$, payable to this student:, ID#, campus box # OR U.S. mail to					campus	
Authorized signature: Date:						

BUDGET PROPOSAL

NOTE: STUDENTS ARE EXPECTED TO CONTRIBUTE TOWARDS THE COST OF THE EVENT FOR WHICH THEY SEEK FUNDING

Your Name: Class Program Title:	Year:			
Trogram Title.				
(1) Fill in all applicable information:				
(a) Registration fee	\$			
(b) Travel (airfare**\$/bus \$/train \$/taxis \$)	\$			
(c) Meals: Breakfast: # meals x approx. \$5 = \$ } Lunch: # meals x approx. \$10 = \$ } Total - Dinner: # meals x approx. \$15 = \$ }				
(d) Accommodation: # of nights x \$	\$			
(e) Supplies, if applicable (please list on separate sheet if necessary)	\$			
(f) Other (specify)	\$			
(g) Add (a) through (f) for Total Cost of Event	\$			
(h) How much are YOU contributing?	\$			
(i) Subtract (h) from (g) for NEW COST OF EVENT	\$			
**Attach cheap internet airfare quote				
(2) Are you receiving PRAXIS funding for this event? Yes No				
(3) List all OTHER sources (excluding the offices listed on this form) from w received or applied for funding (e.g. department funding, Student Aid S organizations):	•			
Source Funds revd?Yes No How m	uch? \$			
Source Funds rcvd? Yes No How m				
Source Funds rcvd? Yes No How m	uch? \$			
Total funds from other sources	\$			
(4) Please complete calculation below:				
(j) Enter amount from (2) above (Praxis)	\$			
(k) Enter amount from (3) above (other funding sources)	\$			
(I) Total Contributions – add lines (j) and (k)	\$			
(m) Insert "NEW COST OF EVENT" (from item (i) in grid at top)	\$			
(n) Insert "Total Contributions" (from item (l) above)	\$			
(o) Subtract (n) from (m) and enter this amount on FRONT of application	\$			

STUDENT EXPENSE REPORT

Name:					ID#:			
Funds were used for:								
Complete this form and submit with ORIGINAL RECEIPTS to College Hall 203 after completion of the event. PLEASE TAPE RECEIPTS to an 8-1/2x11" sheet of paper and mark what each was for.								
Date:	Mon	TUE	WED	THU	Fri	SAT	SUN	TOTALS
Registration								1011112
Meals								
Accommodation								
Transportation					_			
Supplies				+				
Other (specify)								
Other								
Other								
Other				+				
TOTAL EXPENSE PER DAY:								
Amount pre-approved for this event: \$			The attac	The attached receipts total:				
All expenses listed on this report were actually incurred by me while engaged in, AND DIRECTLY RELATED TO , the activity for which funds were given.								
Student's original signature: Date:								

(Do NOT attach this sheet to your application – submit with receipts at conclusion of your event)