



ITE Michigan

Student Chapter Funding Request



Instructions

Please complete the below information and submit the form to the Michigan ITE board at itemichigan@gmail.com.

Requestor Information

Date:		Student Chapter Name:	
Advisor Name:		Advisor Email:	

Request Information

Total Funding Amount Requesting \$

Description of funding use:

Names of students funding covers:

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Advisor Signature
Signature of the Person Submitting this Form

Name
Name of the Person Submitting this Form (print)

Michigan ITE Section Approval

Signature
Signature of Person Approving this Request

Name
Name of Person Approving this Request (print)

Date of Approval
MM DD YY