



ECKERD COLLEGE ORGANIZATION OF STUDENTS

Faculty & Student Interaction Grant

Sponsored by ECOS Academic Affairs

Required Information

Faculty Information:

Name: _____

ID#: _____ **Department / Collegium:** _____

Reimbursement (Up to \$65) _____

(Please attach original receipts with all expenditures circled. Must be submitted within **1 week** of purchase)

Purpose of the Requested Grant:

(Please attach additional sheets if necessary)

Date of Event (or time frame in which the grant will be used):

(Name)

(Signature or initials if emailed)

Email and contact phone

Today's Date

ECOS USE ONLY:

VPAA Approval: _____ Date: _____

VPEF Approval: _____ Date: _____