**BUDGET REQUESTS OUTSIDE OF THE IEP PROCESS**

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

DEPARTMENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

REQUESTOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DIVISION APPROVAL (SIGNATURE): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

VP FINANCE/CFO APPROVAL (SIGNATURE): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DESCRIPTION OF THE REQUEST:

REASON THE REQUEST NOT FUNDED VIA THE IEP PROCESS:

IMPACT OF NOT FUNDING:

REQUEST AMOUNT/SOURCE/DURATION (**MUST COMPLETE ENTIRE SECTION**):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| CATEGORY | POSSIBLE SOURCE | ONE-TIME/ON-GOING | AMOUNT | BENEFITS  | TOTAL REQUEST |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

ADDITIONAL MATCHING FUNDS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SOURCE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REQUEST VERIFIED BY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Source, Salaries & Wages: Budget Director, Projects: Facilities, Other: please provide)*

APPROVED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 President Date