**Funding Request for Programming/Events**

***Please note: All questions must be answered to be considered for funding.***

***Distribution of funds is processed after the event has taken place.***

We ask that events sponsored by the Kirkland Endowment Advisory Committee

credit the Endowment in all publicity.

**Person Requesting Funds:** Click or tap here to enter text.

**Your Email:** Click or tap here to enter text.

**Are you:**

[ ] **Faculty Department:** Click or tap here to enter text.

[ ] **Student Class Year:** Click or tap here to enter text.

[ ] **Staff Department:** Click or tap here to enter text.

**Name of Program/Event:** Click or tap here to enter text.

**Have you ever received funding from KEAC?** [ ] **Yes** [ ]  **No**

**If so, how much?** Click or tap here to enter text.

**Expected Date of Event**: Click or tap here to enter text.

**Description of the activity, including its intended audience (300-400 words):** Click or tap here to enter text.

**Please explain how this programming “supports women and their needs and interests at Hamilton College”.** Click or tap here to enter text.

**Detailed Budget for Programs/Events**

 ***This form does not calculate totals***

**Please Note:**

* Funding is paid through a reimbursement process.
* Reimbursements for speakers/programs will be made at the conclusion of the event.
* ***For payment to foreign individuals, please*** [read the following](https://www.hamilton.edu/offices/business/accounts-payable/payments-to-foreign-visitors) ***before submitting your budget request.***
* If your speaker/vendor is not in WorkDay, it is your responsibility to [obtain the W-9/W-8BEN](https://www.hamilton.edu/documents/DocuSign%20Instructions%20for%20W9%20Form.docx%20%282%29.pdf) and process them in the WorkDay system by [creating a Supplier Request](https://docs.google.com/document/d/1ViV3GI7Y1tCnMeyU0Ah8FX3PWnTxcLjQNwf1vOIB3ZQ/edit?usp=sharing).

|  |  |
| --- | --- |
| **Airfare** |  |
| **Car Service OR Vehicle Mileage (.70/mile)** |  |
| **Lodging** |  |
| **Meals** |  |
| **Honorarium** |  |
| **Other** |  |
|  |  |
| **Total Budget** |  |

|  |  |
| --- | --- |
| **Amount Requested from KEAC:** |  |
| **Other Funding Sources:** |  |

**Budget Narrative**

**If necessary, provide a brief explanation of the dollar estimates listed in your budget**

Click or tap here to enter text.