## Faculty of Science

Name of applicant			E-mail address	
Applicant's status at Simon Fraser	Faculty		Staff	Student
University				
Department(s) or School(s)				
Number of participants at meeting			Number of SFU particip	ants
Meeting type	Other:			
Account # for funds t ransfer				
Funds requested (attach detailed budget)				
Amount requested				
Total cost of conference				
Other sources requested	Amount:			
Registration fee	Amount:			

Justification of request :

Outline of budget and major expenditures:

:

How will the Faculty of Science support be acknowledged?

## Faculty of Science Conference Funds Request Form For internal use only:

Approved	Yes	No	
Amount approved			
Printed name Committee Chair or Designate			Date:
Signature Committee Chair or Designate			
transfer			
Departmental contact(s) Name, email/phone number			
Comments			