COLLEGE OF ARTS & SCIENCES FUNDING COMMITMENT

Date:

FOR OFFICE USE ONLY
JE #
Date:
Budget Journal:

Department/Center: _____ **Requester:** _____

Amount Requested: $ _____ **Fiscal Year:** _____ ☐ One Time Cost ☐ Reoccurring

Transfer of Fund to:

MoCode:	**DeptId:**	**Program:**

Request Explanation/Justification:

Will the Department or other funds be committed to this? ☐ Yes ☐ No
If so, please list the other source(s), amounts and mocode below.

Dean's Comments:

Approvals:

Chair/Director _____ Date _____

Dean _____ Date _____