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|  | **GSS Organizational Funding Award Letter**  **Graduate Student Senate**  **Revised September 2020** | *Graduate Student Senate*  *120LM Kent State Student Center*  *Center for Student Involvement Box 18*  *Kent, OH 44242*  *Email:* [*GSS.info@g*mail.com](mailto:GSS.info@gmail.com%20u) |
| *\*Please submit this form to* [*cjackma2@kent.edu*](mailto:cjackma2@kent.edu) *at your earliest conveince. Please submit pdfs of invoices and/or receipts and an attendance sheet from the event within* ***14 calendar days*** *of the event to* [*cjackma2@kent.edu*](mailto:cjackma2@kent.edu)*. All expenses must be incurred by the organization and individual as outlined by the Bylaws of Graduate Student Senate.\** | | |

**Section 1: Organization Funding.**

Graduate Student Senate will be distributed via a paper check sent to your Flashline Banner Home Address through Accounts Payable (76035). The IRS 1098T (1042S) Forms will include this information and is subject to federal, state, and University guidelines. No exceptions may be made regarding this designation as GSS’s purpose is to supplement student cost towards research experiences and professional development opportunities.

**Section 2: Funding Type.** **Indicate the Event related to this form and indicate the amount of money allocated by the Graduate Student Senate.**

\_\_\_ Speaker Request ($\_\_\_\_\_\_)

\_ \_ Professional Development/Social Request ($\_\_ \_\_)

**Section 3: Personal Information.**

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| --- | --- | --- | --- | --- | --- |
| ***Organization Name*** |  | | | | |
| ***Contact Individual’s Name (First, MI, Last)*** |  | | | | |
| ***Banner ID*** |  | | | | |
| ***Email*** |  | | | | |
| ***Phone Number*** |  | | | | |
| ***Are you a U.S. Citizen? If not, in which country do you hold citizenship?*** | ***Yes*** | |  | ***No*** |  |
| ***Flashline Home Address*** |  | | | | |
| ***College Name*** |  | | | | |
| ***Department/Program Name*** |  | | | | |
| ***Graduate Assistant within this department?*** | ***Yes*** |  | | ***No*** |  |
| ***Name of Event (Purpose of Award)*** |  | | | | |
| ***Date of Event*** |  | | | | |
| ***Location of Event*** |  | | | | |

**Section 4: Purpose of event.**

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**Section 5: Signatures and Agreement. By signing, you are agreeing that the information you are providing is accurate, and the invoices and/or receipts that you are submitting are solely for the reimbursement of organizational costs that were previously approved by the Graduate Student Senate.**

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**Applicant Signature Date**