

**TOMPKINS CORTLAND COMMUNITY COLLEGE
PURCHASE REQUISITION/CHECK REQUEST**

VENDOR: _____

DATE: _____
DEPARTMENT(s): 10-1272-001
Foundation

Please use this form when applying to the Classified Staff Development Fund of the TC3 Foundation. Mail to Teresa Davis, Classified Staff Development Chair, mail code 139 by the appropriate deadline. The Classified Staff Development Fund Committee will make its recommendations to the Foundation in a timely manner.

Name of workshop/conference/class _____
Location of workshop/conference/class _____
Date(s) of workshop/conference/class _____
Purpose of attending: _____

Registration:	\$ _____
Transportation:	\$ _____
Lodging:	\$ _____
Meals:	\$ _____
Books:	\$ _____
Fees:	\$ _____
Other (Please specify):	\$ _____

Dept. Funds:	\$ _____
Other Sources:	\$ _____
Amount Requested From Foundation:	\$ _____
Amount Granted	\$

Have you received funds previously from the TC3 Foundation for Classified Staff Development activities?
If so, please note when _____ for what activity _____
and how much funding _____

Please attach any additional materials you wish to submit to support your request (rationale, workshop brochure etc.) Please submit to your immediate supervisor for the appropriate signatures.

Supervisor: _____

Department Head: _____

Any questions? See Karen Macier or call her at ext. 4366. Please feel free to contact any member of the Classified Staff Development Fund Committee (B. Bregard, T. Davis or S. Eldred).

FOR OFFICE USE ONLY

ORDER # _____
DATE _____
CK # _____
AMOUNT _____
ACCT # _____

REQUESTED BY: _____
D.H. APPROVAL: _____
DEAN APPROVAL: _____
PUCH. AGENT: _____
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FOUNDATION OFFICE
FOUNDATION BOOK