

Graduate Student Association Equipment Grant Request

Student's Name: _____

Department: _____

Supporting Professor(s): _____

Please describe the equipment and its purpose in the context of your research
and/or other academic development:

Anticipated Budget for item(s):

1) _____ Cost: _____

2) _____ Cost: _____

3) _____ Cost: _____

4) _____ Cost: _____

Please attach a letter of support from your thesis mentor or departmental graduate coordinator.

Student Signature: _____ Date: _____

Advisor Signature: _____ Date: _____

Grad. Coordinator Signature: _____ Date: _____

GSA Use Only

Committee Chair Signature: _____ Date: _____

Total Amount Approved: _____