



SIGMA CHI CANADIAN FOUNDATION

APPLICATION FOR APPROVAL OF CHAPTER HOUSE or EDUCATIONAL PROJECT

Return Form to: DOUG TOWERS, FOUNDATION CHAIRMAN

10 Willowood Court, Toronto, ONT M2J 2M3

submitted in advance of project expenditures

please type or print neatly

Chapter Name: _____ University: _____

Address: _____
(street) (other mailing info)

(date) (city) (province) (postal code)

TYPE OF PROJECT: _____

FUNDING PROGRAM: _____
(Name of Program or Chapter Specific Fund - Enquire of Foundation Chairman Re Availability)

DESCRIPTION AND BENEFITS SUMMARY: _____

(Please include a brief description of the benefits expected for both the local chapter and individuals - use reverse for more space)

ESTIMATE: Equipment Name and Description: Cost Estimate

_____	_____
_____	_____
_____	_____
_____	_____

TOTAL ESTIMATED COSTS FOR THE PROJECT: _____
(if space is insufficient - use reverse and simply write total estimated cost here)

GRANT: Total Cost of Project (from above section): _____
Enquire of Foundation Chairman Amount (if any) contributed locally: (subtract) - _____
regarding amount of funds which Amount Applied for Foundation Funding: (net) = _____
are available for your project.

ADVANCE: Amount of Advance (if any) Requested for Funding: - _____
All advances must be confirmed Amount to Be Funded on Confirmed Completion of Project: _____
within 60 days or an invoice will Date advance needed: _____
be sent for the return of funds. (date)

Signatures: **FOR CHAPTER HOUSE PROJECT:**
House Corporation Officer signs to approve Chapter House Project, and the use of chapter funds identified herein for this purpose
FOR CHAPTER EDUCATIONAL PROJECT:
Chapter Advisor signs to approve Chapter Educational Project, and the use of any Current chapter funds, in addition to any basic Foundation program funding available for this purpose

(Consul) _____ (Quaestor) _____
(House Corporation Officer - sign & print Position) _____ (Chapter Advisor) _____

Note: This section will be completed by the Program Administrator at the Foundation

Funding Sources:	Amount
Applicable Foundation Program: _____	_____
Additional Funds From: _____	_____
Additional Funds From: _____	_____
Total Approved Funding for Project:	_____

Approved By Funding Committee: _____ Date: _____
(signature of Funding Committee Chairman)