SAN DIEGO Miramar COLLEGE	# SEEM Committee Project Funding Request Form

Date: _____ **Name of Requester**: _____

Department: **Proposed hours of work**: _____ **Proposed expenditure**:_____

Request included in: Program Review

		Projected Start Date
Project Description *Include program need statement & benefit to students in program*		
List Activities (list collaborators that you have secured to help you accomplish each activity and project the number of hours that each collaborator will be expected to provide for the activity.)		**Projected Dates** **TO**
Project Outcomes *List deliverables and/or outcomes based on scope of work*	If awarded with funds, I agree to report the status of my project at regular scheduled SEEM committee meetings for the duration of the project	**Completion Date**

Please Note: *Work on the project can begin <u>after</u> the requester has accepted the assignment in Faculty Portal or be provided an official notification that the project has been approved.*

_____   _____   _____
Department Chair   Date   Dean   Date   SEEM Committee Chair   Date

<u>Office Use Only</u>

Budget #: _____   # ESU: _____   Date Range: _____

Empl Record: _____   Job Code: _____   Date Added in PS: _____

REV 5.9.19