

REQUEST FOR FUNDING

VOYAGE PROJECT SPEAKERS SERIES

GRADUATE AND PROFESSIONAL SCHOOLS

Speaker's name: _____

Please attach a current c.v. or resume.

Affiliation and/or Occupation (university, company, current career, etc.) _____

Purpose of the event: _____

Approximate *date* of event and *nature* of event (lecture, seminar, retreat, etc.) _____

Proposed topic: _____

Budget. Please estimate the expenses for this event:

_____ Travel, lodging, and meal expenses

_____ Honorarium (speaker's fee)

_____ Other expenses (please specify)

_____ Total Estimated Expenses

_____ Amount to be covered by school or department

_____ AMOUNT REQUESTED FROM PEPPERDINE VOYAGE PROJECT

Contact person for this grant request: _____ Phone
number: _____ E-mail _____

Endorsement by School Administrator (Department Chair, Assoc. Dean, Dean):

_____ Date: _____

Return to: **Stephanie Cupp, Center for Faith and Learning, Mail Code x4352.** If you have questions, contact Stephanie Cupp at x4141 or Stephanie.cupp@pepperdine.edu.