**Project Information**

Project Manager: Click here to enter text.   
Title: Click here to enter text.  
School/Unit: Click here to enter text.   
Division/Department: Click here to enter text.  
Phone: Click here to enter text.   
Email: Click here to enter text.

**Campaign Information**

Goal Amount $ Click here to enter text.  
Fund ID # Click here to enter text.  
Campaign Purpose:   
Click here to enter text.

**Signatures**

*By affixing your signature, you acknowledge support of the proposed campaign.*

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Project Manager Name Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_  
School Dean Name Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_  
Pepperdine Fund Rep Name Signature Date