

Budget Request Form FY2014

Department should complete one form for each individual request

Department: Disa	SSFAB Use					
Program, Service, or Operation Requested Graduate Assistant (9 month)				Only YES	NO	
General Descriptio Funding of a gradu the additional testi	ate assistant p	osition to work in the evening hours	Testing Administrati	on Center to pr	ovide supp	port for
Request Type:	∑ Full	Increase	One-Time	Partial/Matching		
This request would evening hours (i.e. classes that conflicto-back classes. Thopen more hours, where the conflicto-back classes is a recurrence this is a recurrence this is a recurrence of the confliction of the conflictio	benefit studer some math, act with their accounts request was we could serve acces of funding tring expense, it is essent took sessed yearly to questions are a concerns on the	nts in that the TAC control that in that the TAC control that the TAC control that in that the TAC control that in the TAC control that is a will you use to evaluate the control that is seen and the control that is a will you use to evaluate the control that is seen a specifically about last survey about not it.	uld accommodate contering exams). It would be needing extra time excrowding currently out having more space arship, reserves, etc.) of find other funding. The urvey to evaluate hout the Testing Adminition of the second	mmon exams to all also help students for their example occurring in the example. been considered ervice? w students are stration Center	that occur udents who is and havin the TAC. By ed? Please benefitting and stude	in the o have ng back-being explain. g from ents and
Funding Description	on:					
					Amount	
Total Estimated Co	ost			\$12,	500.00	

\$12,500.00

SSFAB Comments/Notes:

Less Estimated Partial/Matching Funds (if applicable)
TOTAL UAF INCREASE REQUEST