Application for Graduate Dean's Support for
Graduate Enrollment Enhancement Program (GEEP)

Name of Academic Unit Requesting Funds   **Date**

Name and Title of Graduate Coordinator, Chair, or Associate Dean   **Name of Travel Preparer** (If travel is involved)

Name and Title of Requestor   **Name of PO Preparer** (If applicable)

Name and Title of Business Manager   **Name of P-Card Holder** (If applicable)

Amount of Requested GEEP Support

Support Requested from the Graduate School: $ _____

Amount of Department Cost-share: $ _____   ****Departments are expected*

          to provide at least 50%

   TOTAL ESTIMATED COST: $ _____   *of the estimated cost.*

Departmental Source of Cost-share Funds: _____ ~ _____ ~ _____

          FUND   ORG   PROGRAM

Estimate of Graduate School Portion of Total Project Costs:	
	$ _____
	$ _____
	$ _____
	$ _____
	$ _____
TOTAL *(Must equal "Support Requested from the Graduate School" above)*	$ 0

Justification (Include how activity relates to recruitment plan and how it will impact enrollment.)

Please provide as much detail as possible on page 2

Travel to dedicated recruitment fairs or events	Name & location of event: _____	Date of event: _____	
	Name of traveler: _____	Dates of travel: _____	
	Name & location of event: _____	Date of event: _____	
	Name of traveler: _____	Dates of travel: _____	
	Name & location of event: _____	Date of event: _____	
	Name of traveler: _____	Dates of travel: _____	

List additional events below.

Registration Fee / Booth Rental	Name of vendor: _____	PO? ____	P-Card? ____
Registration Fee / Booth Rental	Name of vendor: _____	PO? ____	P-Card? ____
Registration Fee / Booth Rental	Name of vendor: _____	PO? ____	P-Card? ____

Printing recruitment materials	Name of vendor: _____	PO? ____	P-Card? ____
Printing recruitment materials	Name of vendor: _____	PO? ____	P-Card? ____
Printing recruitment materials	Name of vendor: _____	PO? ____	P-Card? ____

Campus Visit(s)

Names of prospective students *(If you do not know the names, please provide them ASAP and before they travel):*

_____	Date of visit: _____	_____	Date of visit: _____
_____	Date of visit: _____	_____	Date of visit: _____
_____	Date of visit: _____	_____	Date of visit: _____
_____	Date of visit: _____	_____	Date of visit: _____
_____	Date of visit: _____	_____	Date of visit: _____

List additional prospective students below.

Other Recruitment-Related Activities:

Additional Information:

Return this request to Darina Brackeen, Graduate School, Mailstop 1030, darina.brackeen@ttu.edu