



CTSI Trainee Supplies Request Form

Instructions: Please complete this form with your Primary Mentor's signature and provide a copy to the Program Coordinator to get the appropriate approvals. Please include a printout as an attachment of the item(s) from the website or store you plan to purchase from, showing (1) the item name/description and (2)CTSI Supplies Request Form the price.

This form must be filled out and approved prior to any purchases. Any purchases made without prior approval will be ineligible for reimbursement.

Student Name	Program Name
Today's Date	Funding Mechanism
Primary Mentor Name	
What supplies/equipment are you requesting? Include total quantities and unit prices.	
Please give a brief description of how it is beneficial to your research.	
Date supplies needed by	Total Estimated Cost
Mentor Signature	Date
Program Director Signature	Date
Director of Research Education	n Signature Date
If this request is approved, you may receive an FAO number to use to complete the purchase. This number may only be used for the purchase approved via this form, and may not be used for any other purpose. If you use the FAO for another purpose, you may lose research supply funding privilege. After the purchase is complete, provide documentation of the purchase to your program coordinator. Documentation <u>must include</u> final price (including shipping), item name, item number, vendor, and date of purchase. Proof of delivery (packing slip, etc.) would also be helpful upon reception of the supplies.	
	FOR ADMINISTRATIVE USE ONLY
Funds Available for Use _	FAO Number
Staff Accountant Approval	Date
	Date
Department Approval	Date