**Request for CSME Support for Chapter Activity**

**Chapter Name:**

**Contact Person Name:**

**Email:**

**Date of Proposed Chapter Activity:**

**Short Description of Proposed Chapter Activity:**

(provide website url if available)

**Requested Funding from CSME** (note that a maximum $500 grant from CSME may go towards expenses not funded/reimbursed through other means/sources (including sponsorships):

**Summary of the proposed Budget:**