

Ohio Chapter International Society of Arboriculture
Policies & Procedures Manual



Subject: Request for Funding/Sponsorship

Purpose: To provide a standardized mechanism for the request of Ohio Chapter ISA funds for educational opportunities, special projects and/or other research initiatives from entities with similar interests.

Requirements: To be considered for funding, applicant must complete and return this form.

1) Name of Applicant/Organization _____

2) Contact Person _____ Title _____

3) Telephone # _____ Email Address _____

4) Total amount of money applicant is requesting from the Ohio Chapter: _____

5) Please define the need/purpose (include additional page if necessary).

6) List any additional requests applicant has in reference to the request for funding (i.e. listing in Chapter events calendars, article in *The Buckeye Arborist*, etc.) Please be as specific as possible.

7) Please list benefits to the Chapter if funding is granted (please be specific.)

8) If funding is approved, please provide specific instructions for payment:
a. Check Payable to _____
b. Mailing Address _____

c. Date Required _____

9) Please attach any supporting documents, brochures, etc.

Requests will be brought before the Ohio Chapter ISA Board of Directors in a timely fashion. Please allow 60 days for consideration. **Please return this request with supporting documentation to:**

Ohio Chapter ISA • PO Box 267 • Baltimore, OH 43105-9998

Requests may be scanned and emailed to info@OhioChapterISA.org or faxed to (614) 771-7494.

For Chapter Use Only (Applicant – Please do not write in this box.)

Date Received _____ Date of Board Actions _____ Application was Accepted Denied
Date Applicant Notified of Decision _____ Additional Actions _____