Applicant’s name: Click or tap here to enter text.

Applicant’s title: Click or tap here to enter text.

Campus or Institute: Click or tap here to enter text.

Describe the project, asset, or other item that you would like to fund utilizing the cashflow bridge program:
Click or tap here to enter text.

Describe the strategic benefit and operational impact that this project or use of funds will have on your campus or institute: Click or tap here to enter text.

Please state your requested cashflow bridge amount: Click or tap here to enter text.

Please state your requested first payment date: Click or tap here to enter text.

Please state your requested payment frequency: Click or tap here to enter text.

Please state your requested cashflow bridge repayment term: Click or tap here to enter text.

Account to be charged: Click or tap here to enter text.

Describe the source of the repayment for the requested cashflow bridge: Click or tap here to enter text.

By signing below the applicant acknowledges and approves the submission of this application and the attached financial proforma. Any revenue or enrollment projections included in the proforma should be considered official projections of the campus/institute submitting the application.

Chief Business Officer approval: ________________________      ____________________
Signature                                                  Date

Chancellor approval: ________________________      ____________________
Signature                                                  Date

If approved, the Treasurer and University CFO will provide a repayment schedule of the Cashflow Bridge related to the request.