



**UWOFA Contract Faculty (Part-Time) Members
COVID Relief Fund**

Application and Expense Form

Deadline: October 31, 2020 by 6:00 p.m.

Submission: Email your application and expense form with receipts to uwofa@uwo.ca

Subject: UWOFA COVID Relief Fund

NAME:

DEPARTMENT:

FACULTY:

STATUS (Limited-Duties or Standing Appointment):

AMOUNT REQUESTED (max. \$500):

ADDRESS:

(Cheque will be mailed to this address)

**please ensure your name is written as legally acceptable for cheque-cashing purposes*

Expense date (mm/dd/yyyy)	Expense details (Type of expense, e.g. purchased office chair, purchased new computer keyboard and mouse)	Expense amount
Total (attach all receipts)		



**UWOFA Contract Faculty (Part-Time) Members
COVID Relief Fund
Application and Expense Form**

Please provide a short explanation outlining the incurred expense(s):

Signature – I certify that the information provided is correct:

Submit completed signed application and expense form to:
uwofa@uwo.ca

*Receipts will not be returned after reimbursement.
It is recommended you make a copy of this form and all receipts for your records.*