

# CUMC Funding Application

## Personal Information and Permission to Release Form

First Name..... \_\_\_\_\_

Last Name ..... \_\_\_\_\_

Student Number..... \_\_\_\_\_

Program ..... \_\_\_\_\_

Phone Number ..... \_\_\_\_\_

Email ..... \_\_\_\_\_

I hereby give permission to the current president of the Math Union, Angela Wu, to see my student number, and to release my student number and the contact information on this form to the ASSU and the math department in order to apply for an ASSU Undergraduate Travel Grant and further funding from the department. I understand that this release of information is voluntary.

Signature..... \_\_\_\_\_

Print Name ..... \_\_\_\_\_

Date ..... \_\_\_\_\_