

**2025-2026 ADVOCATES FOR UPSTATE**  
**DEPARTMENT GRANT FUNDING APPLICATION:**  
*Please submit completed application to Jonathan Adler, Administrative  
Coordinator at [advocates@upstate.edu](mailto:advocates@upstate.edu) by  
Friday, February 28, 2025, 12 pm (noon)*

**CAMPUS:** \_\_\_\_\_ **DOWNTOWN** \_\_\_\_\_ **COMMUNITY**

**DEPARTMENT:** \_\_\_\_\_

**PROJECT NAME:** \_\_\_\_\_

**PROJECT PRIORITY (if submitting more than one app):** \_\_\_\_\_

**AMOUNT OF FUNDING REQUESTED:** \$ \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**APPLICANT'S NAME AND SIGNATURE:**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
**Print Name** **Signature** **Title**

**EXT:** \_\_\_\_\_ **E-MAIL:** \_\_\_\_\_

**DEPARTMENT CHAIR/DIRECTOR NAME AND SIGNATURE:**

\_\_\_\_\_/\_\_\_\_\_  
**Print Name** **Signature**

**2025-26 Advocates Department Grant Funding Application**

Please write clearly – do not go close to the edges of the paper (we need to make several copies).

1. **Description of proposal, who you serve, how many? How will this enhance the patient experience?**

2. **Why are you applying for this project?**

3. **Breakdown of Expenses (must be completed to be considered!)**

<b>Expense:</b>	<b>Amount Requested</b>
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
<b>Total Projected Expenses</b>	<b>\$</b>

4. Have you applied, or do you plan to apply, for funding for this project from other sources?

Yes \_\_\_\_\_ No \_\_\_\_\_

Source: \_\_\_\_\_

Amount: \_\_\_\_\_

Status: \_\_\_\_\_

Is this item included in your department budget? Yes \_\_\_\_\_ No \_\_\_\_\_

5. Will this project require additional funding in the future? If yes, please explain:

---

---

6. Other comments for consideration:

---

---

---

7. Did you request funding last year? Yes \_\_\_ No \_\_\_

Did you receive funds? Yes \_\_\_ No \_\_\_ If so, amount received: \$ \_\_\_\_\_

Did you acknowledge The Advocates during the use of your funds, i.e., program, purchase?  
Yes \_\_\_ No \_\_\_

If so, please include a copy of the publication, brochure or use of labels with your grant request.

8. Have you attended or contributed to any past Advocates events? Yes \_\_\_ No \_\_\_  
If yes, which events?

---

---

---

**\*\*\*Grant Applications MUST BE received in The Advocates Office  
by 12 pm (noon) on Friday, February 28, 2025.**

Please call The Advocates' office at 315-464-5610 or email [advocates@upstate.edu](mailto:advocates@upstate.edu) with any questions.