

CU Global Center: **test test test test test etest test testtes t** School/Institution:

Program/Project Title:

Program/Project Description:

Cost Estimate*:

Beginning / Ending Dates:

**Attach Project/Program Budget*

We, the undersigned representatives of the School/Institution noted above, acknowledge our School/Institution's responsibility for the expense(s) incurred through Columbia's Global Center, listed above. We authorize the Center to incur these expenses on their bank account, and then to invoice us for the expenses and any agreed upon administrative fees. Please attach a copy of the associated project/program budget to this form.