

# APSC FUNDING ASSISTANCE REQUEST

*Provide detailed information regarding your funding request below*

Date of Request:

Requesting Agency:

Name/Title of Person Completing this Form:

Phone/E-mail of Person Completing this Form:

Fill in all blanks below!	
AMOUNT REQUESTED:	
SPECIFIC USE OF FUNDING:	
NAME/LOCATION/DATES (if training course):	
ADDITIONAL INFORMATION (i.e. name and address to send reimbursement check, if applicable):	
Agency Head Signature/Date:	

APPROVED:

NOT APPROVED:

Comments: \_\_\_\_\_

Executive Director: \_\_\_\_\_ DATE: \_\_\_\_\_

## MAIL or EMAIL TO:

Alaska Police Standards Council  
PO Box 111200 – Juneau, AK 99811-1200  
Phone: 907-465-4378  
[wendy.menze@alaska.gov](mailto:wendy.menze@alaska.gov)