😇 Ya	ale University	3501 FR.10 FAS Faculty Request for M	loving Allowance
	Alexa Schlieker FAS Dean's Office <u>alexa.schlieker@yale.edu</u> 1 Hillhouse Ave, 3rd Floor	Date:	
Fr:	Dept. Preparer/Contact:		
	Dept:	Ext.:	
New Facu	lty Member:	Start Date:	
Rank:	Professor Associate Professor Assistant Professor Gibbs Instructor	Other	
requested to be covered by the FAS Dean's Faculty Moving account. A copy of the offer letter is attached. Household Other:			
	(Street Address)		
	(City)	(State) (Zip	p Code)
	(Phone Number)	(E-mail Address)	
ApprovedChair			
For FAS Dean's Office Use			
		Approved: Date: Date: Alexa Schlieker, Operations Manager	
Comments for Transporation Office:			
Form rev. 2/19/16			