

FACULTY DEVELOPMENT TRAVEL GRANT APPLICATION

1. A. Name: _____ B. Date: _____
C. Rank: _____ D. Tenured: Y N

2. A. Meeting: _____

B. Meeting dates: _____ C. Refereed: Y N

D. Conference type: National/International Regional State/Local

E. Number of funded meetings which you have attended during this academic year: _____

| | | |
|-------|--------------------------------|--|
| 3. A. | Total Meals: | |
| | Total Lodging: | |
| | Registration: | |
| | Total Mileage: | |
| | Air Fare: | |
| | Other (specify): | |
| | TOTAL REIMBURSEMENT REQUESTED: | |

4. Funds from other sources:

Amount: _____ Source: _____

5. A. Title of Proposal or Creative Activity: _____

B. Presentation Status: Accepted Invited Under Review

C. If presentation has been **accepted** or **invited**, or is currently **under review**, attach appropriate verification. (**Only presentations accepted will be funded.**)

D. Please submit a one page (**maximum**) abstract for each paper presented.

6. Attach the **Travel Request Form**

7. The requested travel is integrally related to my professional development plan: Y N

8. Signature of the applicant: _____

For committee use only:

This proposal has been: Accepted Rejected Deferred

The amount of travel dollars assigned: _____

Signature of Committee Chair: _____

Signature of Department Head: _____