

FACULTY APPLICATION FOR TRAVEL FUNDS

Name: _____ Date: _____

Destination (Event/Venue/City): _____

Dates of Travel: _____

I will (check all that apply):

- | | | |
|--|--|---|
| <input type="checkbox"/> attend meeting | <input type="checkbox"/> attend a business meeting | <input type="checkbox"/> other (describe below) |
| <input type="checkbox"/> chair session | <input type="checkbox"/> present a paper | |
| <input type="checkbox"/> present a paper | <input type="checkbox"/> present a recital | |
-

Estimated Cost: Transportation _____

Meals & Housing _____

Other _____

Total _____

During this fiscal year, I have received \$ _____ in University funds for travel.

Other funds available to support this request:

Grant (amount \$ _____) Funding from host/presenter (amount \$ _____)

Other _____ (amount \$ _____)

- No other sources (check if no other options apply)

For Office Use Only:

Amount committed: \$ _____

DEO Endorsement : _____

Date: _____