



FACULTY SENATE FACULTY TRAVEL FUNDING APPLICATION INFORMATION

IMPORTANT: This funding request must be received at least 14 calendar days minimum before your beginning travel date. (*Note – Money may not be disbursed in time to take advantage of early registration pricing. Senate is not responsible for delays in the remaining travel approval process and applicant may need to pay out-of-pocket initially. Senate is in no way authorized the applicant for full or partial reimbursement, only this supplement based on prior approval to attend conference.*)

Face-to-face **OR** virtual travel funding

- Maximum travel funding: \$500.00 (includes both domestic and international)

Note – due to reduced funding, Endowed Faculty will not be given any priority consideration.

To avoid rejection or delay, please follow this funding request procedure carefully:

Step 1: Submit this travel funding request (page 2 of this form) at least 14 calendar days **before** your beginning travel date directly to **Ms. Wanda Jacobs** (JTS 221, wjacobs@gram.edu) who will then forward it to the Executive Committee. Your request must include evidence of your participation in a refereed* professional conference, convention or similar professional organizational meeting. As evidence of participation, **all** of the following items are **required** with this application:

- a. Faculty Travel Funding Request Application and Travel Authorization Form. You will not be required to get signatures on the Travel Authorization Form. This document will be used for informational purposes. Ms. Jacobs will input the form in DocuSign.
- b. Letter or email of acceptance that includes date and location.
- c. Abstract of presentation.
- d. Conference program listing your accepted work/presentation.
- e. Draft copy of the “Request for Authorization to Travel” form that includes a budget for registration, transportation, lodging and/or meals. Include only the portion that will be paid by the Faculty Senate if your travel is approved.

***Please note, funding will not be granted for presentations at ad hoc, impromptu meetings or for generic international “academic conferences” that accept virtually any paper regardless of topic. Pseudo-academic conferences (“junkets”O meant to fill venues at tourist destinations will not be approved. Application is reviewed, however, based on scholarship of presentation and **not** the location of the conference.**

Step 2: Once submitted, the Executive Committee will review your request and vote on its approval; a simple majority vote is required for approval. The committee will notify you of the application’s approval or rejection via email within one (1) calendar week of your submission (If your application is rejected, the committee will indicate why).



Faculty Travel Funding Request Application

Applicant Information:

Applicant's Name:	Department/Unit:
Academic Rank:	G Number:
Check One: Tenured <input type="radio"/> Untenured <input type="radio"/> Check if applicable: Endowed Professor <input type="radio"/>	GSU Email:

Travel Information:

Reason for Travel (include type of presentation, if applicable):	
Title of Presentation (if applicable):	
Departure City:	Destination City:
Dates of Travel:	Dates of Meeting:
Name of Meeting:	Place of Meeting:
Sponsoring Organization:	Organization/Meeting Website:

Total Requested: \$ _____ (not to exceed \$500 – domestic or international)
 (Include "Travel Authorization" form).

Applicant's Signature: _____ **Date:** _____

Approved by Faculty Senate Executive Committee:

Faculty Senate

President's Signature: _____ **Date:** _____



TRAVEL AUTHORIZATION FORM

NO REGISTRATION OR RESERVATIONS SHOULD BE MADE UNTIL ALL APPROVALS ARE OBTAINED

Instructions: Submit travel request with **ALL** supporting documents.

Date of Request:

Encumbrance number:

Traveler's Name:

G-

Departure Date:

Return Date:

Destination City:

Purpose of Travel: _____

Estimated Expenses:

Registration Fees:		\$
Rental:		\$
Airfare:		\$
Mileage: @0.655		\$
Gas Card		\$
Lodging-Number of Nights: @		\$
Meals and Incidentals:	1.	\$
1. Breakfast: \$ Days:	2.	
2. Lunch: \$ Days:	3.	
3. Dinner: \$ Days:	4.	
4. First and last day meal total \$		
Other Reimbursable Items (Description):		\$

Cash Advance Request:

Amount: \$

Pay to G-

Additional Travelers	
Name	G-number

Approval Signatures:

Supervisor:	President/Vice President:	Travel Office:

Traveler's Signature: _____