

**FACULTY SENATE**

**FACULTY TRAVEL FUNDING APPLICATION**

**IMPORTANT:** This funding request must be received at least 14 calendar days ***before*** your beginning travel date.

* Maximum Domestic Travel Funding: $500.00
* Maximum International Travel Funding: $1,000.00

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

**Step 1:** Submit this travel funding request (back of this form) at least 14 calendar days ***before*** your beginning travel date directly to **Mrs. 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:

1. Faculty Travel Funding Request Application (this form)
2. Letter or email of acceptance that includes date and location
3. Abstract of presentation
4. Conference program listing your accepted work/presentation
5. Draft copy of the “Request for Authorization to Travel” form that includes a budget for registration, transportation, lodging and/or meals

**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.)

**Step 3:** After approval, finalize your “Request for Authorization to Travel” form; the Faculty Senate’s budget account number is 404230. You must also obtain all of the required signatures on that form, including the Faculty Senate President’s.

**Step 4.** Finally, in order for travel funds to be disbursed, you must submit the “Request for Authorization to Travel,” ***with all required signatures***, to the Travel Office.

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| **GRAMBLING STATE UNIVERSITY Faculty Travel Funding Request Application** |  |

**Applicant Information:**

|  |  |
| --- | --- |
| Applicant’s Name: | Department / Unit: |
| Academic Rank: | G Number: |
| Check One:  Tenured ☐  Untenured ☐ | 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: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  
(Include budget information on “Request for Authorization to Travel” form.)

**Applicant’s Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Approved by** **Faculty Senate Executive Committee:**

**Faculty Senate**

**President’s Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_