



Grambling State University Title III Post-Travel Form



Post-Travel Request Form

Note: Form 4 must be completed and submitted to the Title III Office, along with approval Form 1 within (5) five working days after travel.

Date: Click or tap to enter a date.

Title III Activity Name: Click or tap here to enter text.

Title of C/W/O: Click or tap here to enter text.

Date(s) and Location(s) of C/W/O: Click or tap here to enter text.

Travelers Name	Job Title	Email	Campus Extension
	Click or tap here to enter text.		

Please provide a brief summary of each session attended at the C/W/O.

Using separate sheets please use as many additional sheets as needed to respond to the following questions.

PLEASE ANSWER ALL QUESTIONS.

1. What professional benefits were attained by attending this training?
2. How will the knowledge gained be used to enhance Grambling State University?
3. How have you or will you share this training with your colleagues at Grambling?