The College of Liberal and Applied Arts is providing supplemental travel funds to support faculty who are presenting a scholarly paper at a professional meeting. This money is in addition to the annual allotment of professional development monies awarded to each tenure and tenure-track faculty member. The supplemental support is limited to **$500** during the fiscal year for any one faculty member. All full-time faculty members, defined as having a line-item listed in the university’s annual budget, are eligible to compete.

**The committee will not accept more than five (5) faculty applications for the year from the same department. A faculty member cannot apply for funding for the same paper for which a student has applied for funding.**

Faculty applying for supplemental funds must complete the attached form and obtain the signature of their departmental chair. The chair’s signature verifies that:

- the faculty member will use these funds to help defray the costs of the professional travel,
- the faculty member is on a conference or meeting program, and
- an acceptance letter must be supplied with the application, or a brief explanation as to why a letter cannot be supplied at the time of the application.

Travel allotments can only be used in the fiscal year in which the travel occurs. Priority funding considerations are the following:

- the significance of the conference to the faculty member’s discipline, with preference for national events;
- the faculty member’s tenure status, with preference for non-tenured (probationary) personnel; and
- the merit of the proposal.

Applications will be accepted until **March 19, 2018** on the attached form. **Applications must be typed.**

Applications should be submitted to the Dean’s Office and must be received by the deadline to be eligible. A committee composed of one chair, one member of the College Council, and one member from the Graduate Council will review applications. Funds approved may be less than or more than amounts requested, depending on the availability of money and the applicant’s supporting information.

If awarded, copies of travel statements must be forwarded to the Dean’s Office with **two weeks** of return to campus.
A. Faculty Information

NAME:_______________________________________________________________

1. Title of Paper: ____________________________________________________

2. Conference Attending: ____________________________________________

3. Location: _________________________________________________________

4. Dates of Travel: __________________________________________________

5. Total Amount Requested:
   Mileage: _________________
   Air Fare: _________________
   Hotel: _________________
   Meals: _________________
   Registration: _________________

6. Explain how the proposed research paper is relevant to your professional development and the disciplinary importance of the conference itself:
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

B. Department Chair: Please sign and send to the Dean’s Office.

Signature affirms the following:
   The requested funds will be used to defray the costs of professional travel.
   The faculty member is presenting a paper at a conference or meeting.
   The faculty member has full-time status.

Chair Signature:_________________________
Department:____________________________
Date:__________________________________

Committee Recommendation: Decision to Award Funding (please check): _____ Yes   _____ No
Amount Approved: ______________  Date: ______________