

REQUEST FOR FACULTY DEVELOPMENT TRAVEL FUNDS

Please attach a copy of the conference brochure (with schedule of activities) and/or meeting agenda. A copy of the travel requisition form, indicating an estimate of expenses **must accompany this request. *Approval is required 15 days prior to the travel departure.**

TO: Academic Affairs Tennessee State University 3500 John A. Merritt Blvd. Nashville, TN 37209	FROM: (Department Name) (Department Box #) 3500 John A. Merritt Blvd. Nashville, TN 37209
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Part I. General Information

Employee and/or Visitor Name:	Employee ID Number (SSN if visitor): T	Date of Departure/Date of Return:
Department Name:	College:	Employee's Title:

Amount Requested: _____
 (up to \$2,100.00)

Conference Location: _____

Reason for Request (check one):

<input type="checkbox"/> Accreditation Purpose	<input type="checkbox"/> Faculty Candidate Interview	<input type="checkbox"/> Tenure Faculty Preparation
<input type="checkbox"/> Conference Committee Member	<input type="checkbox"/> Officer in Organization	<input type="checkbox"/> Other (please explain)
<input type="checkbox"/> Conference Participant	<input type="checkbox"/> Promotion Faculty Preparation	_____
<input type="checkbox"/> Conference Presenter	<input type="checkbox"/> Research	_____

Detailed description and purpose of travel request:

Intended faculty development and outcome:

List journals/other papers, articles, research to be submitted for publication:

Part II. Approvals

Tennessee State University	
Department Chair (or designee) _____ Date _____	Dean (or designee) _____ Date _____

Tennessee State University
Vice President (or designee) _____ Date _____