



Travel Request Form / Application for Professional Development Funds

For Fall, please submit by September 1; for spring, please submit by January 2

Name: _____ Today's date: _____

Professional Development Category		
<input type="checkbox"/> Research/Student Development <input type="checkbox"/> Faculty Research <input type="checkbox"/> Faculty Service <input type="checkbox"/> Faculty-Student Research <input type="checkbox"/> Faculty-Student Public Service	<input type="checkbox"/> Presenter <input type="checkbox"/> Conference Presenter <input type="checkbox"/> Workshop Presenter <input type="checkbox"/> Proposal Accepted (documentation attached) <input type="checkbox"/> Proposal submitted (expect reply by _____)	<input type="checkbox"/> Educational Development <input type="checkbox"/> Conference Attendee <input type="checkbox"/> Workshop Attendee <input type="checkbox"/> Face-to-Face Class or Course <input type="checkbox"/> Online Class or Course
<input type="checkbox"/> Other (e.g., required attendee) Please explain		
If this absence causes you to miss class, state how many classes and what arrangements have been made to take care of them:		

Professional Development Information		
Title of project/conference/workshop/course:		
Name of student(s) involved (if applicable):		
Sponsoring organization/institution:		
Location:	Dates: From	To
To justify support of your request, please provide a brief description (no more than 200 words) of the project / presentation / course and explain how it will contribute to your professional development and if / how it will contribute to improved teaching and learning. (Attach a separate sheet, if necessary.)		

Note: The college aims to share resources; thus, yearly professional development may not be available and priority will be given to faculty who have not had recent funding.

Budget Information		
Total funds requested: \$ _____		
Please provide an estimated cost for all applicable line items using the spaces provided below. The comments section should be used to provide explanations where necessary.		
Expense Type	Cost	Comments
Travel/Airfare:		
College Car (please request gas card)		
Personal Car (___ miles @ \$.45)		
Lodging (___ nights @ \$_____)		
Meals (use per diem by city of the event)		
Registration/Fees/Tuition		
Materials		
Incidentals/Misc.		
Other		
Subtotal		
Amount (if any) to be charged to departmental budget or to be funded externally or personally (explain in comments)		
Total		

Expected Outcome	
Please indicate how you plan to use the experience to enrich the MMC community (check all that apply)	
<input type="checkbox"/> Publication <input type="checkbox"/> Presentation or Workshop (e.g., CTE, Big Picture) <input type="checkbox"/> Submit Written Report	<input type="checkbox"/> Performance or Exhibit <input type="checkbox"/> Participate in Symposium <input type="checkbox"/> Other (specify)

Employee Acknowledgement	
I understand that I may request, if my proposal is approved, an advance on the funding from the Business Office. I further understand that should I receive an advance and not clear it within 30 days, the outstanding amount will be deducted from my payroll check.	
Employee Signature: _____	Date: _____

Approvals	
Division Chair <input type="checkbox"/> Approve <input type="checkbox"/> Deny	
Signature: _____	Date: _____
Provost <input type="checkbox"/> Approve <input type="checkbox"/> Deny	
Signature: _____	Date: _____