

NORTHEASTERN STATE UNIVERSITY REQUEST FOR FACULTY DEVELOPMENT FUNDS

Name:

Signature:

Department:

College:

Dates of Trip:

Location:

Title of Presentation:

Conference/Event Title:

How will the proposed request help you achieve your scholarly and professional objectives?

Itemized amount of total expenses:

Item	Cost
Airfare	
Baggage Fees	
Registration	
Lodging	
Mileage	
Per Diem	
Rental Car	
Local Transportation	
Miscellaneous	
Total Cost	\$0.00

Amount of Funds Requested from Faculty Development:
(In-state \$400, out-of-state \$800, international \$1000)

Amount of Funds from Academic Unit:
(At least 25% of amount requested from FDC)

Dean of College Signature:

Date:

Other Sources of Funding:

Assistant VP for Academic Affairs Signature:

Date:

Faculty Development Committee Chair Signature:

Date:

Approved Amount:

Denied:

Revised 07/29/2019