

SCHOOL OF COMMUNICATIONS FACULTY DEVELOPMENT FUND REQUEST

Each faculty member is eligible for up to \$900 worth of approved support for his or her professional development each academic year. Prior to use of the support or reimbursement, the faculty member needs to submit an application to the Director of the School or a designated Associate Director for approval.

Faculty members are encouraged to seek additional funding in support of their creative and scholarly activities from sources outside the School of Communications such as the CSCE, the FTLC, etc.

School of Communications funding can be used for expenses covered by CSCE, FTLC and other sources (e.g. scholarly travel) as well as areas not covered by these sources (e.g. membership fees, journal subscriptions, equipment, etc).

Requests will be considered on a case-by-case basis. It is important that faculty members show how whatever they are requesting will help with their development.

Name of Applicant: _____

Title of Position: _____ ☐ Check if Tenure Track

Title of Request: _____

(Attach other pertinent information such as notice of the event, conference, etc., registration fees documented in event registration materials, lodging costs, travel costs, etc.)

Brief Summary of request:

Amount requested from School of Communications _____

Amount already received this AY from Sch/Com _____

Amounts requested from CSCE _____ FTLC _____ Other _____ = _____
(specify other)

Amount to be paid by Applicant _____

Applicant's agreement:

I understand that this SOC funding request is for actual expenses incurred during the activity described, and that I am expected to minimize costs. I may exceed the daily meal allowance set by GVSU only at my own expense. If I discover beforehand that the estimates are too low, I will inform the SOC Director. If estimates are too high, I am expected to spend less than requested.

Applicant Signature

Date

BUDGET ESTIMATES FOR TRAVEL REQUESTS ONLY

Location/Dates of Travel: _____

Expenses

Registration Fee(s)	_____
Ground Transportation from GVSU/Home to Airport and return	_____
Ground Transportation from Airport to Hotel and return	_____
Airfare or Mileage (Do not claim mileage in excess of airfare)	_____
Lodging (specify dates)	_____
Meals (specify dates, per diem = \$32)	_____
Other (specify)	_____
TOTAL	_____

SOC Director Signature

Date

Date Travel Voucher Submitted _____ Amount Paid _____