

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 prior to the travel event.

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

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 \$1,000.00)	-
Conference Location:		
Reason for Request (check one): Accreditation Purpose Conference Committee Member Conference Participant Conference Presenter 	 Faculty Candidate Interview Officer in Organization Promotion Faculty Preparation Research 	 Tenure Faculty Preparation Other (please explain)
Detailed description and purpose of trav	el request:	
Intended faculty development and outco	ome:	
List journals/other papers, articles, resea	arch to be submitted for publication:	
David II. Annuanala		

Part II. Approvais			
Tennessee State University			
Department Chair (or designee)	Date	Dean (or designee)	Date

Tennessee State University	
Vice President (or designee)	Date