



**Faculty Professional Development
Presentation/Conference Grant Funding Request & Final Grant Report**

This form is to be used to request reimbursement and submit final report for a Faculty Professional Development Presentation/ Conference Grant and submit a final report. **Only faculty who have been awarded this competitive grant are eligible for reimbursement of travel/conference expenses under this program.**

This form must be submitted to the Provost's Office prior to May 31 to request reimbursement. If the conference is after May 31 and receipts are not available prior, this approved form must be submitted along with the Disbursement Request Form, Appendix H5, prior to June 30.

Name _____

Conference Title: _____

Date of Conference: _____ Location of Conference _____

Presentation Poster

Title of Presentation/Poster: _____

Attendance at Request of Conference: Keynote Speaker Panelist Other

If other, explain: _____

Funding request (maximum \$500.): _____

Registration fee: _____

Lodging: _____

Travel expenses: _____

Meals: _____

This form also constitutes your final grant report, and funding is contingent on its completion.

Please respond to the following:

Describe how attendance/presentation at this conference has contributed to your professional development.

If you have attended as a keynote speaker or panelist, indicate your area of expertise and how this activity contributes to your professional development.

Describe how your research, scholarship, or creative activity will change practice of your discipline.

Indicate if this work has been accepted or has been submitted for publication. Please include journal and date of publication for accepted articles, or journals to which the article has or will be submitted.

Submit to Provost's Office with Disbursement Request form and receipts by **May 31 for payment.**

For use by AVPAA Office:

Date Received _____

Approved by AVPAA: _____

- Copied to Faculty, sent to Business Services for payment. Amount: _____ Date: _____
- Follow-up: Clarification requested _____

APPENDIX H5
DISBURSEMENT REQUEST FORM FOR GRANTS



Departmental Request for Disbursement

Amount: _____ Date: _____

_____ Call ext. _____ when ready
_____ Mail per instructions
_____ Pick up at Business Services

Payable to: _____ TAX ID# _____ on file

Address: _____ City, State, Zip _____

Explanation: (Must be completed. Attach invoices, receipts, or other appropriate documentation.)

Receipts attached.

Submitted by: _____
Faculty Signature

Department: Provost-VPAA

Signature: _____

Program & Object Code: 1494-8275

Authorized by: Kenneth Porada

Attached approved form **by May 31:**

- _____ *Request for Professional Support Funds*
- _____ *Request for Books/CDs/Video Purchase*
- _____ *Request for Presentation/Conference Funds*