

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 _____