

RFT Faculty Request for Travel Funds

(Approval Required Prior to Travel to Receive Reimbursement)

Date: _____

Name: _____ ID# _____

Indicate the Type of Request: ___ Conference or ___ Professional Organization Membership

Complete for Conference Travel

Event: _____

Event Date: _____

Type of Scholarly Dissemination or Travel:

- Panelist, Meeting Officer, Discussant
- Paper Presentation
- Poster Presentation
- Other: _____
- Conference Attendance (only)

Title of Presentation: _____

Event Location: _____

Mark here if this involves international travel: ___

Have you received any other academic travel funds for this academic year? If so, please list destination and funding.

___ Yes: Destination _____

___ No

Complete the Following Expenditure Breakdown

Description	Requested	Expended	Account Number
Registration	\$	\$	
Transportation	\$	\$	
Lodging	\$	\$	
Food:	\$	\$	
Other:	\$	\$	
Total:	\$500.00	\$	

Complete for Professional Organization Membership

Professional Organization: _____

Membership Dues: \$ _____

Comments: _____

Faculty Member Signature: _____ Date: _____

Department Head Approval: _____ Date _____

Travel Funds Approved: _____

*Applicant is required to provide proof of participation before the meeting or event.

** Faculty are expected to complete the MSU travel form upon their return.
