

SSAC APPLICATION FOR FACULTY TRAVEL COSTS

Name _____ Date _____
 Position _____ Department _____
 University Telephone Number _____ Year of Appointment at UND _____
 Highest Degree Held _____ Institution _____ Year _____
 Destination _____ Start Date _____ End Date _____
 Purpose of Travel (if presentation, include name of conference) _____

 Title of Presentation and Author(s) (Indicate presenting author with an asterisk) _____

 Type of Presentation (e.g., poster or paper) _____

Proposed Budget. The Senate Scholarly Activities Committee normally funds only a portion of airfare or its equivalent, and each faculty member is allowed **only one travel award per annual award cycle (ending September 15 of each year)**. However, the Committee would like to know anticipated costs of the travel and other sources of funding, if any, that have been pledged to support portions of the travel request. If request is for travel to present at a conference **attach verification of acceptance** that includes the name, location, and dates of the conference (e.g. acceptance letter, email, conference program with presenter's name, etc.). If the verification of acceptance you receive is written in a foreign language, please provide an English translation. Unless detailed justification is provided for two presenters of the same paper, the SSAC will fund only one presenter. The **signed original application and all attachments** must be submitted to the UND Office of the Vice President for Research & Economic Development (Twamley 103) on or before the deadline date.

Registration	If length of stay at destination is greater than 21 days, please explain:
Air Transportation	
Ground Transportation	
Per Diem	
Lodging	Other Sources of Support:
Incidental Expenses	
TOTAL	
Amount Requested	

List grants and awards received from the Senate Scholarly Activities Committee during the **past** five academic years giving month, year, amount, and type (i.e. research grant, travel award, publication costs award). For research grants, indicate if final report was filed.

Month/Year	Amount	Type			Final Report Filed	
		Research	Travel	Publication	Yes	No
_____	_____				Yes	No
_____	_____				Yes	No
_____	_____				Yes	No
_____	_____				Yes	No
_____	_____				Yes	No
_____	_____				Yes	No
_____	_____				Yes	No

 Signature of Applicant

 Signature of Department Chair
 (Or Dean's Signature if Applicant is Department Chair)