

**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	
<b>Amount Requested</b>	

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)