

Application Approved/Disapproved
 Date:
 Amount:



Professional Travel Grant Program Application Form 2012-2013

Please complete both pages of the application:

NAME:		WSU PID No:
Department:		Phone:
Office Address:		Email:
Academic Staff Classification:		
Years at Current Classification:		Total Years at WSU:
Name of Conference/Activity you are attending:		
Are you <input type="checkbox"/> Presenting At <input type="checkbox"/> Attending this event <input type="checkbox"/> Board Member or other official capacity (Check one)		
Conference Location and Dates:		
Reimbursement Amount Requested from the ASPDC Travel Grant Program (maximum amount available per person per fiscal year is \$800.00) **Not to exceed 50% of travel.		\$
Have you already received an ASPDC travel grant in this fiscal year (Oct 1, 2012 – Sept. 30, 2013)? If yes, please specify the amount.		Yes/No
		\$
List ASPDC events you attended in the last six months		- - - -

Signatures

_____ (Applicant) **Date:** _____

_____ (Dean/Director) **Date:** _____

Please complete all columns and rows showing both expected expenses and expected sources of funds. The Academic Staff Development Committee shares this budget information with appropriate departments on a regular basis to ensure a coordinate review of joint requests. *****Do Not Leave Any Lines Blank *****

Allowed Expenses	Amount \$	Office Use only \$
Meals: No. of days____x <i>per diem</i> (\$ 42.50 or other)		
Taxi and/or Limousine		
Parking		
Lodging: No. of days__ x Daily Rate__		
Rental Car		
Auto Mileage		
Conference Registration Fee		
Transportation: Type: Destination:		
Miscellaneous expenses: (<i>please elaborate</i>)		
Total Should Equal the Amount in the attached approved Travel Request printed with the Concur Travel Wayne System		

Expected Source(s) of Funds	Amount \$	Office Use \$
ASPDC Travel Grant Reimbursement: (not to exceed 50% of total cost or \$800)		
College/Division:		
Department:		
External: (indicate sources)		
Personal or Other:		
TOTAL		

Your application packet should include two sets, an original and one copy, of the following. Please check off in the second column:

1. ASPDC Travel Grant Application Form	
2. Program and/or other documentation of the activity you are attending.	
3. Brief description of the project and its relationship to your professional development.	
4. A of the approved Travel Request printed from the Concur Travel Wayne System.	

Submit to:

ASPDC Travel Grant Program Subcommittee Chair
 Geraldine Johnson, Academic College Enrichment Services
 1330 A/AB
 313-577-7671
jerrijohnson@wayne.edu