

REQUEST FOR TRAVEL SUPPORT  
COLLEGE OF LIBERAL STUDIES

Name \_\_\_\_\_  
(Last) (First) Department Date

\_\_\_\_\_ Campus Address \_\_\_\_\_ Campus Phone

\_\_\_\_\_ Organization and Event

\_\_\_\_\_ Date(s) of Travel \_\_\_\_\_ Location

**Professional Involvement:** (Documentation must be attached or forwarded as soon as possible.)

- \_\_\_\_\_ a. presentation of a paper, solo exhibition, or solo performance
- \_\_\_\_\_ b. service as an organization officer, board member, conference organizer, or juror
- \_\_\_\_\_ c. session chair, organizer, panelist, group exhibitor, or group performer
- \_\_\_\_\_ d. attendee
- \_\_\_\_\_ e. other (please explain) \_\_\_\_\_

**Impact Statement:** Describe how the outcomes of the travel will impact teaching, research, or service activities and how the information will be shared with others: \_\_\_\_\_

**Cost Estimate:** (Refer to Travel Guidelines, available from University Financial Administration on the web at: <http://www.uwlax.edu/travel/>)

Transportation: Auto mileage \_\_\_\_\_ or Airfare \$ \_\_\_\_\_ Total \$ \_\_\_\_\_  
Lodging: Number of nights \_\_\_\_\_ at \$ \_\_\_\_\_ per night \_\_\_\_\_  
Meals: Number of days \_\_\_\_\_ at \$ \_\_\_\_\_ per day \_\_\_\_\_  
Miscellaneous (please itemize) \_\_\_\_\_  
Total Estimated Amount (Grand Total) \$ \_\_\_\_\_

**Support provided by Department:**

List other members of Department also attending

\_\_\_\_\_ Department Chair's Signature

List other sources of support such as registration waiver, foundation grants, external grants, etc.

Total \$ \_\_\_\_\_

Total amount requested from the College of Liberal Studies Total \$ \_\_\_\_\_

Total Amount Granted Total \$ \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_ Dean's Signature