

# SIMPSON COLLEGE

## Application for Faculty Travel Funds

Name:	Date:	
Phone:	Email:	
Dates of Travel:	Amount Requested:	
Purpose of Travel:		
If you would like the college to prepay items (registration, airfare, etc.) describe them below – be sure to include & attach documentation for processing.		
Item 1:	Amount:	
Charge Account Number:		
Item 2:	Amount:	
Charge Account Number:		
Item 3:	Amount:	
Charge Account Number:		
If you are presenting a paper, chairing a session, etc., please attach the following information: Brief summary of your paper, description of the professional organization sponsoring the meeting, procedures used to select papers for the program, and other relevant information.		
Any additional comments or directions for the Dean's Office regarding this trip:		
Save Request form and Email to: <b>Shelly Priebe</b> as an attachment to shelly.priebe@simpson.edu		
<i>Dean's Office Use Only</i>		
Approved by:		
Funds Available: Regular Professional Travel Fund _____ Additional Total (carry-over/presenter) _____  Special Travel Funds _____ circle one if applicable - (McNeill) (Ballantine)		
<i>Business Office Use Only</i>		
Check to:	Address:	
Date Approved:	Amount:	Account #: