## MEDAL FUND GRANT REQUEST

## **MEDAL Fund Staff Development Committee**

(Email this request to Medal.Fund@millersville.edu or mail completed form to Michael McDowell in Information Technology)

Name:		Submission Date:		
Department:		Telephone Extension:		
Email Address:				
Date(s) of Event:				
Name and Location of M	feeting:			
I hereby attest that I do have my supervisor's approval to attend this event. <i>Initial</i> :				
Type of Event:	Conference Con	nvention		
Traditional Training (Seminar, Classroom-Based Instruction, etc.)				
Non-Traditional Training (Web Event, Computer Based Training, etc.)				

Event Costs	Total Cost	University or Department Funded	Requested MEDAL Fund Grant
Event Fee			
Travel			
Lodging			
Meals*			
Miscellaneous*			
Totals			

\* Meals and Miscellaneous items to be calculated based upon University accepted per diem and mileage allowances.

## How will this event benefit you in the performance of your job?

(Use additional space if necessary, but brevity is appreciated.)