**GROUP TRAVEL-TO-PRESENT GRANT APPLICATION**

Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MU ID#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MU ID#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MU ID#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MU ID#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Campus Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chairperson: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please check one: \_\_\_ Tenure/tenure track

\_\_\_ Temporary Full-Time (TFTF) or Regular Part-Time (RPT), effective dates of current appointment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List participants’ roles in the presentation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Requested amount (not to exceed $1000): $\_\_\_\_\_\_\_\_\_\_

Title of presentation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Primary Author: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of presentation:

\_\_\_\_\_ Presentation \_\_\_\_\_ Performance/Exhibition \_\_\_\_\_ Paper

\_\_\_\_\_ Symposium \_\_\_\_\_ Panel \_\_\_\_\_ Workshop

\_\_\_\_\_ Poster \_\_\_\_\_ Other

Conference title/Sponsoring organization:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Scope of presentation (please mark appropriate category):

\_\_\_\_\_International/National \_\_\_\_\_Regional \_\_\_\_\_State \_\_\_\_\_Local

Estimated costs:

1. Registration fee $\_\_\_\_\_
2. Transportation $\_\_\_\_\_
3. Hotel Accommodations $\_\_\_\_\_
4. Subsistence/meals $\_\_\_\_\_
5. Other (specify) $\_\_\_\_\_

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

Guidelines:

1. Provide official letter of verification of acceptance or other official documentation (email, conference, program, etc.) that demonstrates your participation and role in the event.
2. Provide a justification describing your activity—its content, its value to your professional development, and your role in the presentation-- in 250 words or less. This description should justify the professional benefits gained from this experience so they are obvious to the committee (see guidelines at www.millersville.edu/facgrant/index.php).
3. Submit completed application to [FACULTY.GRANTS@MILLERSVILLE.EDU](mailto:FACULTY.GRANTS@MILLERSVILLE.EDU).