PRESIDENTIAL TRAVEL SUPPORT REQUEST FOR 2004-2005

Name		Date			
Title/Rank			Tenured	?Yes	No
If not tenured, check sta	atus:	Tenure Ti	rack	Non-tenur	e Track
College		Department			
Name of conference/eve	nt and organizat	tion:			
Dates of travel and loca	tion:				
statement indicating name/date of the com should also indicate proceedings, whether member was lead au whether it was elected	ho have previously i the amount, the pur ference and where i whether or not it wa r or not the paper re thor. If a leadership d, appointed, or volu	received Presidential Tra pose (to present a paper, t was held. If a paper/cr s refereed, whether or no sulted in a published jou role was performed, the unteer.	wel Support fund perform a leade reative work was ot it was publishe rnal article, and statement should	ding should att ership role, etc. presented, the ed in conference whether or no	tach a .), and the statement ce of faculty
Funds are requested to	support travel fo	or the following pur	pose:		
	announcement; rein	per or a creative wo nbursement contingent u			
To serve in a leadership role (<i>indicate whether <u>elected</u> officer, <u>appointed</u> or <u>volunteer</u> committee chair or member, etc; attach documentation).</i>			<u>nteer</u>		
(*Presidenti papers/creat	ial Travel Support fu tive works and/or lea	unds are intended priman idership in professional be considered but only if	rily to support pro organizations; co	esentations of onsideration oj	scholarly f travel for
If funds are requested for check the response that	-	• =	-	ve work, ple	ease
~					

Selected through a "blind" peer review process ("blind" review: refereed, with names of presenters removed from paper/work before being reviewed by panel of peers)
Selected through a peer review process but not a "blind" review (refereed; reviewed by panel of peers with names of authors available).

- ____ The presenter(s) was/were *invited* to present, but the scholarly paper/creative work was not "blind" or peer reviewed.
- _____ Papers submitted were accepted without a review process.

(9/04)

***************************************	***************************************
COMMITTEE RECOMMENDATION:	
Recommend funding in the am	
Indicate any conditions:	
Do not recommend funding	
Reason:	
Committee Chair:	Date

PROVOST'S ACTION:	
Funding approved in the amoun	nt of:
Funding not approved.	
Signature of Provost	Date