



OFFICE OF FACULTY
DEVELOPMENT

**Conference Participation Funds
Request Form**

Name _____

Academic Department _____

Today's Date _____

1. Request Category (I A-D; II A-E) which best describes the activity:
Please attach appropriate documentation. If your activity is in the IA category, describe the process by which your proposal was selected and include documentation as to the competitive nature of the activity.

2. Event Description
Name of the Professional Organization:

Name of Meeting or Conference:

Location and Date:

3. Describe the activity for which you are requesting funds. Be as specific as possible (i.e., include title of paper, name of group or section to which you are presenting, estimated number of participants.)

4. Expenses Estimate. Please provide your best estimate of expenses.

Registration	Accommodations <i>(based on sharing a double room, i.e half a double room rate)</i>
Air Fare	Meals <i>(maximum allowance per day is \$30)</i>
Mileage <i>(\$.535 per mile)</i>	Other
Ground Transportation	Total estimated cost of conference: \$ _____

Please return the completed form by Email to facdev@messiah.edu or Campus Mail to Suite 3008.

sharpening intellect deepening christian faith inspiring action