



UNIVERSITY OF GUAM  
UNIBETSEDĀT GUAHAN

Administration and Finance  
Human Resources Office

### UNIVERSITY FACULTY TRAVEL GRANT APPLICATION FORM

**Note:** The Faculty Senate Standing Committee on Faculty Excellence (SCFE) will only consider applicants who are eligible and have submitted the required documents for the University Travel Grant.

**Eligibility:** Faculty who are tenured or employed in tenure-track positions at the University of Guam and who are not on authorized leave (except for faculty on sabbatical), and who has at least one year remaining on their current contract with the University of Guam.

Application Documents Required:

1. A completed and signed Application Form
2. An endorsement transmittal from the applicant's appropriate administrator
3. A price quote (3 quotes if airfare is over \$1,500) indicating the least expensive airfare to the intended event
4. An event announcement including the schedule of activities (program)\*
5. A completed registration form for the event. If not available, please indicate registration deadline: \_\_\_\_\_\*
6. An official acceptance notification, if presenting at the event\* If not available, please forward as soon as received.
7. Abstract, paper, or other comparable information, if presenting at the event\*

\* copy acceptable.

#### A. APPLICANT INFORMATION

Name: \_\_\_\_\_ Current Rank: \_\_\_\_\_

School/College: \_\_\_\_\_ Unit: \_\_\_\_\_

Email Address: \_\_\_\_\_ Contact Number(s): \_\_\_\_\_

Current Employment Status (check appropriate box):

- Contractual (Tenure Track Appointment)  
 Continuing Employment  
 Tenured

#### B. TRAVEL REQUEST (check appropriate box)

I am applying for the University Travel Grant (Please sign below):

I, \_\_\_\_\_, hereby acknowledge that my application for this travel funding assistance is conditioned upon the "ARTICLE V ON FACULTY OFF-ISLAND TRAVEL



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TO ATTEND ACADEMIC MEETINGS GUIDELINES (pp. 164-166) and ARTICLE VII TRAVEL GUIDELINES (pp. 203-212) of the Rules and Regulations Procedures Manual.”

**C. EVENT INFORMATION (Information on conference, workshop, etc.)**

Title of Event: \_\_\_\_\_

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

Conference Dates: \_\_\_\_\_ Travel Dates: \_\_\_\_\_

Applicant's role at the event:  Attendance only  
 Attendance and Presentation  
 Other: \_\_\_\_\_

If presenting, please state reason for travel:

- Invited Speaker  Juried Paper/Lecture Presentation  
 Panel/Oral Presenter  Committee Chair/Facilitator  
 Poster Presenter  Round Table Participant  
 Other: \_\_\_\_\_

State title or topic of presentation (if applicable):  
 \_\_\_\_\_

**D. BUDGET INFORMATION**

Allowable Categories	Cost
• Airfare	_____
• Per Diem	
○ (\$ _____ per day X _____ days)	_____
○ obtained online at <a href="http://www.gsa.gov">www.gsa.gov</a>	
• Registration Fee	_____
• Total	_____

Total Travel Grant Requested  
 (See Guidelines for total amount allowable) \_\_\_\_\_

Other funding source(s):  I am not seeking other funding source(s)  
 I am concurrently seeking other funding source(s) for this travel



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If concurrently seeking other source(s), please identify the source(s) and amount sought (i.e., Federal Funding):

**E. APPLICANT’S ACKNOWLEDGMENT**

I certify that the statements made are true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Applicant’s Signature

\_\_\_\_\_  
Date

FOR OFFICE USE ONLY											
<input type="checkbox"/>	Approval Recommended				<input type="checkbox"/>	Approval Not Recommended					
Chair, Faculty Senate Committee on Faculty						Date					
<input type="checkbox"/>	Approved				<input type="checkbox"/>	Disapproved					
Senior Vice President, Academic and Student						Date					
<input type="checkbox"/>	Approved				<input type="checkbox"/>	Disapproved					
President			Date								
<i>Revised 06/23/12</i>											