

Request for Professional Development Travel Funds

Yavapai College Staff Association (YCSA)

APPLICANT INFORMATION

Name: _____ Date: _____

Phone#: _____ Amount requested: \$ _____

TRAVEL/CONFERENCE INFORMATION

Location of conference: _____ Date(s) of conference: _____

Early registration deadline: _____ Fee for late registration: _____

Brief description of purpose for travel: _____

TRAVEL QUESTIONNAIRE

1. What are your duties at the college that relate to the topics of this conference? _____

2. What topics will be covered? _____

3. How will your colleagues, students or department benefit from this conference? _____

4. Which of the college strategic initiatives does this conference support? _____

5. Charge center to be used for balance of trip expenses? (Required) _____

REQUIRED SIGNATURES

Applicant: _____ Supervisor: _____

YCSA Funding Chair: _____ Dean: _____

FOR OFFICE USE ONLY

Amount approved: \$ _____ If denied, please state reasons: _____

Business Office

VP Administrative Services