

# FACULTY SCHOLARSHIP PROPOSAL

Valdosta State University  
Funding Category C. Professional Presentation

Name:	Date:
Current Title:	Department:
Email Address:	Phone:
Dates of Travel:	Location of Event:

Description of proposed activity (include nature of the work to be conducted)		
Presentation title		
List any co-authors, if none indicate NA. (Include each individual's title, affiliation, indicate if they will be attending)		
Outcome of activity Describe specifically how the activity will assist faculty growth & development		
Indicate if you have received any funding from FSRC during the current academic year. If yes, how much?		
Budget (Enumerate costs and describe nature of the costs to be incurred)	1. Transportation Cost	
	2. Automobile Rental	
	3. Registration Fees	
	4. Hotel	
	5. Meals	
	6. Ground Transportation (taxi, etc.)	
	7. Other (parking, phone, etc.)	
	Total Cost	
Indicate if you have any other funding. If yes, explain how much and from what funding source.		
Amount of grant requested (Maximum award for each fiscal year \$1000.00)		

<p>Completed Application Checklist</p>	<p><b>Each Item must be complete otherwise your application will be rejected</b></p> <ol style="list-style-type: none"> <li>1. Provides a completed application (no blank boxes)</li> <li>2. All essential documentation has been included (a document (email/letter indicating acceptance to present at a meeting or conference or a published program)</li> </ol>
<p><b>By Signing this document, you agree to the following:</b></p>	<p><b>1. Submit your expense report within 60 days of your return from travel. Failure to Submit within 60 days of your return may result in no reimbursement</b></p>
<p>All Signatures must be completed for this proposal to be considered</p>	
<p>Applicant:</p>	<p>Date:</p>
<p>Department Head:</p>	<p>Date:</p>
<p>Dean/Director:</p>	<p>Date:</p>
<p>Proposal submissions Instructions</p>	<p>Submit via DocuSign and route as follows:</p> <ol style="list-style-type: none"> <li>1. Applicant (signature)</li> <li>2. Department Head (signature)</li> <li>3. Dean/Director (signature)</li> <li>4. Mrs. Monica Close (receives a copy only)</li> </ol>
<p>Any publicity of the granted activity should mention funding from the office of faculty scholarship</p>	