\*This form must be attached to the Travel Authorization Form \*Hand written documents will not be accepted

## Travel support is limited to \$1,000 per individual.

Name:	Department:	Kean ID#:
Category:		Employee Status:
Type of Presentation:	Title of P	resentation:
Describe in detail how t campus community:		rly contributions, teaching effectiveness, and service to the
Scholarly Contribution		
Teaching Effectivene	SS:	
Service:		
Provide rationale on any travel for more than three days:		
	nflict with scheduled class time, ple rectors, and Deans also need to pro	ase indicate the plan for your scheduled classes while away wide coverage for their office.
Disciplinary history: Y	ES NO	
Copy of the current semester teaching schedule is attached.		

Date of Application:

Applicant Signature:\_