

Application for Travel Expenses Chancellor's Fund Travel Grant

Faculty Applica	nt Informatio	n		
Name:			Department:	
Select a Travel (àrant			
Travel Informati 1. Destination:				
2. Travel Dates:				-
3. Conference Name				-
Budget Informa	tion			_
4. Airfare:				
5. Conference Fee:	Airfare will be limite	ed to no more than \$500.00		
6. Hotel:				
7. Total Budget:	Hotel expenses lim	nited by UC Policy BFB-G-28	3, Appendix B	
Accounting Info	rmation			
To process your award we should be available to hel	e will need (1) your ! p you obtain that inf	Department ID and (2) a pre- ormation. Your award will be	existing project linked with UCS	D associated with you, the faculty member. Department staff F Fund 5000.
8. Department ID:	•			
9. Pre-existing proje	ct ID:			
Applicant's Signature		Date	Title of Applica	nt (Must be salaried at 50% or greater)
Department Chair's S	gnature			