

## FSU FACULTY TRAVEL GRANT APPLICATION

Please return the entire application packet no later than March 15, by 5 p.m., for Spring travel of the same year or no later than October 15, by 5 p.m., for Fall travel of the same year.

**Note: Please download this form *before filling it out*. Then save the form and submit it by email to [provost@fsu.edu](mailto:provost@fsu.edu). Your information will not be transmitted electronically.**

1. First Name:
2. Last Name:
3. EMPLID#:
4. Faculty Rank:  
**(All applicants must be tenured or tenure-earning.)**
5. College:
6. School/Department:
7. FSU Email Address:
8. Departmental Travel Representative:
9. Travel Representative's Email Address:
10. Title of Meeting (please spell out acronyms):
11. Location of Meeting (City and State/Country):
12. Date of Meeting (MM/DD/YY – MM/DD/YY):
13. Please check one of the following:

14. This conference is:

15. Brief Description of Nature of Meeting and of the Sponsoring Organization:

16. Is this a regularly occurring meeting (annual, semi-annual, etc.)?

17. Title of Presentation:

18. Type of Presentation:

Paper/Oral

Poster

Performance

Other (Specify):

**Note: If a poster, provide evidence below that this is the only option for presentation or that other forms of presentation are severely limited.**

19. Has your abstract, paper, or presentation been reviewed for acceptance in the program of the conference, symposium, etc.?

20. Are you the presenter?

21. Co-authors (if any) and their affiliation:

**Note: To be eligible, you must be the person who actually presented the paper.**

22. Please check one:

23. Please enter the total amount you are applying for (up to \$1,000 for domestic travel/\$1,500 for international travel): \$\_\_\_\_\_

24. Check below each item of supporting documentation that you have appended. Please note that applications missing pieces of documentation will **not** be considered for an award.

Acceptance letter or email (REQUIRED)

Conference program or printed web page(s) (can be preliminary) showing your name, presentation information, conference title, location, and date (REQUIRED)

Copies of actual receipts (if travel has already taken place) OR copies of estimates from Concur/conference website (if travel has not taken place) (REQUIRED)

Airfare/Railroad/Bus

Rental Car

Taxi (estimate OK)

Parking fees (estimate OK)

Mileage (personal vehicle, # of miles x \$0.445)

Hotel

Conference registration fee

**ALL TRAVEL MUST ADHERE TO CURRENT TRAVEL RESTRICTIONS. PLEASE SEE [TRAVEL REFERENCE GUIDE](#) OR CONSULT YOUR DEPARTMENT TRAVEL REPRESENTATIVE FOR MORE INFORMATION.**

25. Which alternative sources of support are available to you?

26. In which of the last three academic years (if any) have you received funds from this program (if none, please list as NONE; for actual, list as "Fall 2025," etc.)?

## **REQUIRED ATTESTATION**

This specific travel grant program is funded by university funds and must adhere to state and federal requirements, including Florida Statute [1004.06](#) and Florida Board of Governors regulation [9.016](#).

As such, the event theme/ call to papers and your work may NOT:

- *Seek the advantage of a particular group on the basis of color, sex, national origin, gender identity, or sexual orientation;*
- *Advocate for classifying individuals on the basis of color, sex, national origin, gender identity, or sexual orientation;*
- *Promote the position that a group or individual's action is inherently, unconsciously, or implicitly biased on the basis of color, sex, national origin,*

- gender identity, or sexual orientation;*
- *Have a central purpose of creating or preventing change to a government policy/action/function on a social topic that polarizes or divides society among political, ideological, moral, or religious beliefs.*

By submitting the application you are affirming that the answers to the questions below are “no.” If any response is “yes” the Office of the Provost cannot provide funding for your presentation.

1. Does your conference/event theme OR its call for papers include the italicized issues presented above?
  - YES
  - NO
2. Does your presentation include the italicized issues presented above?
  - YES
  - NO

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Applicant signature (may be electronic) and Date

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Supervisor signature (may be electronic) and Date

Please send signed form and supporting materials in one PDF document to [provost@fsu.edu](mailto:provost@fsu.edu).