FUNDING REQUEST – THINGS TO KNOW

MATERIALS NEEDED
1. ONE copy of the Cover Sheet and Application
2. ONE copy of the Travel Authorization form

NOT COVERED BY THIS ALLOCATION
(1) Food (Meals, Snacks, Alcoholic and Non-Alcoholic beverages)
(2) Third party reimbursements (per UA Policy)
(3) Honoraria
(4) Stipends (“cash”) for self or others
(5) Technology (iPads, Laptops, TVs, Video Cameras, Photographic Cameras)

IMPORTANT REMINDERS

Please remember that if you are traveling, you MUST submit a completed travel authorization form PRIOR to your departure. Failure to submit a travel authorization in a timely manner may not affect your application process at the Departmental level, but FSO (The Financial Services Office) may refuse approval of reimbursement for not following UA Policy. Departmental approval for funding does not guarantee funding, this is dependent on timely submission of documents and providing the documents needed for reimbursement. Original receipts are required for reimbursement. For information about per diem rates allowed, pre-travel policies and reimbursement policies, please visit https://history.arizona.edu/pre-travel as well as https://history.arizona.edu/post-travel. Maximum allowable hotel expenses and per diem rates depend on city and dates of visit; by UA FSO policy we cannot award per diem costs that exceed the allowances indexed on their website. Priority will be given to those presenting at conferences.

Submit a Word or PDF version of your application via email to Katherine Morrissey (kmorriss@arizona.edu) and, when approved, send a copy to Maggie Trinkle (mtrinkle@arizona.edu).
A. APPLICANT

FULL NAME: ____________________________

Last Name ____________________________ First Name ____________________________ M.I. ____________________________

PHONE: (_________) — ____________ — ____________  [ ] WORK  [ ] CELL  [ ] HOME

UA E-MAIL ADDRESS: ____________________________

B. FUNDING PURPOSE
To meet FSO requirements, provide a brief description of how this funding will be used. If appropriate, include the conference name, date(s), and location.

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C. BUDGET

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Total Funding Requested

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APPLICATION

Proposal Please use the space below to provide details about your funding request. For example: For conference travel, include an abstract of your paper and/or explain your role at the conference, and discuss the value of the conference for your professional development. For research travel, describe the research project, outline your schedule, detail the research sources/activities in which you will be engaged, and discuss the value of this travel for your work.

Have you applied to other sources of funds? If so, please list them here.

FOR DEPARTMENT USE ONLY

Application Received On: / / FUNDING WAS: [ ] APPROVED [ ] DENIED Funding approved: $ Approver Signature: ________________________________