

FACULTY DEVELOPMENT GRANT
COVER SHEET

Faculty Member Requesting Grant: _____

Department: _____ College: _____

Project Title: _____

Project Date: _____

Project Description (include conference name and location):

PROJECT TYPE (Check all appropriate boxes. See FDG section of Faculty Handbook for clarification of geographic specifications, and "productive participation". **Maximum funding** for each category is listed next to the category)

- PRESENTATION
 - National/International (\$1400)
 - Southeast (\$1000)
 - State and Regional Professional Conferences (\$800)
- PRODUCTIVE PARTICIPANT
 - National/International (\$1400)
 - Southeast (\$1000)
 - State and Regional Professional Conferences (\$800)
- RESEARCH (\$700)
- ACADEMIC SUPPLIES (\$200)
- TRAINING/WORKSHOP (\$300)

GENERALIZED BUDGET Each line must contain a dollar value, even if it is zero.

LINE 1: Funding Requested: _____

LINE 2: Outside Funding: _____

LINE 3: Departmental Contribution: _____ (Chair's initials if not zero) _____

LINE 4: College Contribution: _____ (Dean's initials if not zero) _____

LINE 5: **Total Cost of Project:** _____ (Verify that this is the total of lines 1-4) _____

APPROVALS: Department Chair/Date: _____ / _____

Academic Dean/Date: _____ / _____

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VPAA: PREVIOUS GRANTS? YES NO Date of last Grant: _____

SUMMARY ON FILE? YES NO Date of last Grant: _____

BUDGET DETAIL*

	Amount Requested	Amount Approved
Registration fees	_____	_____
Air fare	_____	_____
(Destination): _____		
Ground transportation (to/from): _____		
Own vehicle (Mileage ____ @ 0.58 per mile).	_____	_____
Rental car and related expenses.	_____	_____
Hotel (_____ days @ \$ _____ per day).	_____	_____
Meals (_____ days @ \$ _____ per day).	_____	_____
For in-state and out of state daily maximum meal allowance, please visit http://sao.georgia.gov/sites/sao.georgia.gov/files/related_files/site_page/SOG%20Meal%20Allowances%202014.pdf https://www.gsa.gov/travel/plan-book/per-diem-rates		
Project Supplies/ Equipment (provide details).	_____	_____
Other (provide details).	_____	_____
Total Cost of Project	_____	_____

* If necessary, attach a separate page with a furthermore detailed budget including all relevant costs.

As per the Faculty Handbook, you are required to attach a summary of the project, including what your participation will be and verification of your participation (ex. a letter of acceptance), if appropriate.

Signature of Applicant /Date: _____ / _____

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FDC: Full Funding Partial Funding Denied

Total Funds Approved: _____

Comments: _____
