



Staff Travel Award for Professional Development Applicant Information

Full name:	<div style="display: flex; justify-content: space-around; font-size: small;"> Last First M.I. </div>	Date:	
Position/Job Title		Area:	
Contact info:		Office/Room	
	Email	Cell phone	
No. of years in Music		Supervisor:	
		Supervisor email:	

Briefly describe your current role and responsibilities:

Description of Funding Request

Describe the professional development opportunity you are seeking funding for (e.g., conference, workshop, training program):

Location of Activity:	Date(s) of Travel:
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Explain how this opportunity aligns with your professional goals and benefits the organization.

Outline the potential impact of this professional development on your job performance, skills, and knowledge. How will it benefit both you and the organization?

Budget Summary:

Provide an estimated breakdown of expenses related to the travel opportunity:

Registration/Conference Fees:		Refer to the Educational Assistance information on the MSU HR website: Educational Assistance Program (msu.edu)
Transportation (Air, Ground, Mileage)		
Lodging/Hotel Accommodation:		
Meals:		
Other:		
(amount of University Ed. Assistance available)		
Total		

Amount Requested: _____ **Account/Sub-account** _____

Employee Signature: _____ **Date:** _____
Supervisor Signature: _____ **Date:** _____

Application Review:

Reviewed by: _____ **Date:** _____
Reviewed by _____ **Date** _____
Amount Awarded: \$ _____