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Keith Gilyard, 313 Old Main, University Park, PA 16802  
**Your completed form must be typed**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

College: \_\_\_\_\_ Office Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Rank: \_\_\_\_\_

Nature of the proposed activity: (**Please be specific**): present a paper; visit library or laboratory; participate in a symposium or professional meeting; present a seminar, publication of research, etc.

List Title of Paper, Symposium, Presentation, or Publication: \_\_\_\_\_

Date(s) of Activity: \_\_\_\_\_

Location or Sponsor of Activity:

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

Professional Benefits Expected: (check or complete as appropriate):

- increased expertise or demonstration of expertise in the area of \_\_\_\_\_
- contacts with professional colleagues
- advice on a research project
- contacts with potential sources of research, development, and programmatic support
- other (specific) \_\_\_\_\_

Funds Requested (Not to exceed \$600 for travel and presentations or \$2,000 for subvention fees): \_\_\_\_\_ To cover (Specify): \_\_\_\_\_

Matching Funds (if any): \_\_\_\_\_ Source: \_\_\_\_\_

Endorsement by Department/Program Head if a Co-sponsor. Co-sponsorship is typically required for travel and presentation support.

\_\_\_\_\_  
*Signature* Date: \_\_\_\_\_

\_\_\_\_\_  
*Print or Type Name*

\_\_\_\_\_  
*Address*

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE NOTE:** An abstract of your paper/symposium/presentation must be submitted to Eileen Williams at [emj1@psu.edu](mailto:emj1@psu.edu) within thirty (30) days following the completion of the proposed activity as it may be posted on the Senior Faculty Mentor website.

**FOR OFFICE USE:**

o AMOUNT APPROVED \_\_\_\_\_ DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

o DISAPPROVED \_\_\_\_\_ DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_