

Request for SFM Sponsored Faculty Development Support Funds

Download the fillable PDF form, complete, and return to: Senior Faculty Mentors, 313 Old Main, University Park, PA 16802 seniorfacultymtr@psu.edu

Your completed form must be typed

Name:	ame: Title:				
College: Office Address:					
Phone:		Rank:			
		ease be specific): present a paper nar, publication of research, etc.	; visit library or laboratory; pa	rticipate in a symposium or	
List Tit	le of Paper, Symposium, Pre	sentation, or Publication:			
Date(s)	of Activity:				
Locatio	on or Sponsor of Activity:				
City			State	Country	
Profess	sional Benefits Expected: (cf	neck or complete as appropriate):			
(Specif	□ other (specific) Requested (Not to exceed \$7 y):	ect urces of research, development, an 750 for travel and presentations	or \$2,000 for subvention fee	es): To cover	
Matchii	ng Funds (if any):	Source:			
Endors suppor	3 .	am Head if a Co-sponsor. Co-spo	nsorship is typically requir	,	
		Sig	nature	Buto	
			Print or Type Name		
			Address		
Signatu	ure of Applicant:			Date:	
within ti	hirty (30) days following the co	paper/symposium/presentation mus ampletion of the proposed activity a			
FOR OI	FFICE USE:				
0	AMOUNT APPROVED	DATE	SIGNATURE		
0	DISAPPROVED	DATE	SIGNATURE		