

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: _		Title:			
College	ege:Office Address:				
Phone:		Rank:			
		ease be specific): present a paper; vis ar, publication of research, etc.	it library or laboratory; pai	ticipate in a symposium or	
List Titl	e of Paper, Symposium, Pre	sentation, or Publication:			
Date(s)	of Activity:				
Locatio	n or Sponsor of Activity:				
City			State	Country	
Profess	sional Benefits Expected: (ch	eck or complete as appropriate):			
	☐ other (specific) Requested (Not to exceed \$6		2,000 for subvention fee		
Matchir	ng Funds (if any):	Source:			
Endors suppor	5 .	am Head if a Co-sponsor. Co-sponso		ed for travel and presentation Date:	
			Print or Type Name		
			Address		
Signature of Applicant:			Date:		
		naper/symposium/presentation must be on of the proposed activity as it may be			
	FFICE USE:				
O	AMOUNT APPROVED	DATE	SIGNATURE		
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