FACULTY DEVELOPMENT GRANT COVER SHEET

Faculty	wember Requesting C	ərant:					
Department: College:							
Please	note that only one fund	ded Faculty [Development project is	s permitted per semest	er.		
Project	Title:						
Project	Date:						
Project	Description (include co	onference na	me and location):				
"produc	t Type (Check all approciation participation". Check to category is listed nex	oose one cate	egory per proposal (C gory)	•			
	Presentation/Producti	ve Participar	nt				
	National/International	(\$1,400)	Southeast (\$1,000)	State (\$600)	Local (\$200)		
	Research (\$700)						
	Academic Supplies (\$200)						
	Training / Workshop (\$300)						
Genera	alized Budget Each lin	e <u>must</u> cont	ain a dollar value, eve	n if it is zero.			
Line 1:	Funding Requested:	_		_			
Line 2:	Outside Funding:	_		_			
Line 3: Departmental Contribution:				_ (Chair's initials if no	t zero)		
Line 4: College Contribution:				(Chair's initials if not zero)			
Line 5: Total Cost of Project:				(Verify this is the total of lines 1-4)			
Approvals: Department Chair/Date _							
Academic Dean/Date _							
VPAA:	Previous Grants:	Yes	No	Date of Last Grant: _			
	Summary on Files?	Yes	No	Date of Last Grant:			

Budget Detail*

	Amount Requested	Amount Approved
Registration Fees		<u> </u>
Air fare		<u> </u>
(Destination):	_	
Ground Transportation (to/from):	_	
Own Vehicle (Mileage@ 0.70 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 allows	nce, please visit:	
https://sao.georgia.gov/sites/sao.georgia.gov/files/related_file	s/site_page/SOG%2	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	-	<u> </u>
*If necessary, attach a separate page with a furthermore. As per the Faculty Handbook, you are required to attach participation will be and verification of your participation.	n a summary of th	e project, including what your
Signature of Applicant / Date:		1
FDC: Full Funding Partial Funding	J Denied	
Total Funds Approved:		
Comments:		•