Travel Support Application Must Attach to Request for Travel Authorization Form		
NAME:	DATE:	
DEPARTMENT:	I.D. #	
TELEPHONE EXTENSION:	E-MAIL:	
HOME MAILING ADDRESS:		

Travel support is limited to \$1,000 per individual.				
1. Employee State	JS:	2. Category:		
	Faculty - full time		Presentation of original research/scholarship/ creative works	
	Faculty - adjunct		Active Participation/Professional Presentation	
	Other: (Specify)		University-Initiated Travel	

Reminder: Appropriate documentation for any of the categories above must accompany application (e.g., schedule of lectures, conference program, relevant brochures, invitation letters, conference announcements etc.).

Describe in detail how the program will enhance your career development:

a) How will this activity enhance your teaching effectiveness and/or student learning?

b) How will this activity advance your professional development and scholarly contributions?

c) How will this activity advance your college or the campus community?

The information stated on this application is accurate to the best of my knowledge. I will make every attempt to recognize Kean University during the activities in which I plan to participate.

Signature of Applicant:	Date of Application: