**Funding Request Form for Professional Improvement Plan**

**Funding Requests must be approved by office of VPI IN ADVANCE of the activity or expenditure.**

**(Fill out this form and “save as” to your documents folder with your name on the file label. Print, sign, have your D.E. sign and then send to the office of the VPI.)**

Your Name:

Your PIP Cycle Dates:

Amount Requested:

This money will be used for:

The part of your plan that this activity will support (may be cut and pasted):

An explanation linking the expenditure of funds to the part of your plan being supported:

Budget: (attach travel budget form, if applicable)

Expenses:

Air Fare: $

Mileage $.585/mi @ miles $

Lodging @ $ /day: $

Meals @ $54/day in state $

$66/day Out-of-state: $

Registration: $

Misc: $

TOTAL EXPENSES $

Funding Sources:

PIP Funds: $

Dept Travel Funds: $

Personal Funds: $

Other (please specify): $

TOTAL FUNDING $

Please note that your expenses and income must balance.

*Faculty Signature Date*

*D.E. Signature Date*

REV 9/10/19