MEMORANDUM

TO: Full-time Teaching Faculty
FROM: Erwin Wong, Acting Provost and Senior Vice President
DATE: September 2019
RE: Support for Professional Leadership Activities

Since the spring semester of 1999, the college has provided supplemental funds to support faculty development.

Support for Professional Leadership Activities
In addition to the current $450 reimbursement to conference attendees, the college supports up to $750 ($1,200 maximum) for travel to professional meetings and conferences that result from a full-time faculty member's election and/or appointment to a professional board or committee (national or regional). Full-time faculty members must seek and obtain prior approval from the Provost/Senior Vice President of Academic Affairs.

Please note the following:

- Funds are limited and are allocated on a first-come, first-served basis.

- Documentation of professional leadership activities is required for reimbursement.

- Support for First-time Presenters and Support for Professional Leadership Activities cannot be used for the same trip.

- Standard travel regulations and policies must be followed.

EW:ej
OFFICE OF THE SENIOR VICE PRESIDENT AND PROVOST

Leadership Activity Funds Request

Traveler’s Name: ____________________________ Title/Rank: ____________________________

Department: ____________________________ Office: ____________________________ Tel: ____________________________

Purpose of Trip: ____________________________

Class Coverage: Course ____________ Sec.: ____________ Days/Time: ____________________________

Name of Substitute: ____________________________

Itinerary—Arrivals/Departures

Destination: Departing from (city/state): ____________________________ (on) Date: ____________ (at) Time: ____________________________

Arriving at (city/state): ____________________________ (on) Date: ____________ (at) Time: ____________________________

Return Trip: Departing from (city/state): ____________________________ (on) Date: ____________ (at) Time: ____________________________

Arriving at (city/state): ____________________________ (on) Date: ____________ (at) Time: ____________________________

Itemized Expenses

Lodging ______ days @ $ ______ / day $ ____________________________

Meals ______ days @ $ ______ / day $ ____________________________

Conference Registration Fees $ ____________________________

Air/Train Transportation $ ____________________________

Taxis and Local Travel $ ____________________________

Misc. Expenses $ ____________________________

Total Itemized Expenses $ ____________________________

Less PSC-CUNY or Grant Funding $ ____________________________

Funds Requested $ ____________________________
Emergency Contact Information

Name: ___________________________  Tel.: ___________________  Email: ___________________________

__________________________________  __________________________
Signature of Traveler                Date

Authorization

Amount approved and allocated from PSC-CUNY funding: $_____________  Grant funding: ____________

Amount requested from Leadership Activity Fund $__________________

Department Chairperson: ________________________________

Chairperson’s Signature: ___________________________  Date: ________________

Provost (signature) ____________________________  Date: ________________