

UNIVERSITY OF OKLAHOMA
Weitzenhoffer Family College of Fine Arts

ARTS! ARTS! ARTS!
FACULTY REQUEST FOR TRAVEL FUNDS

Note - Dean's office must receive the completed form at least 4 weeks prior to travel.

Name _____ Email: _____

Home Address: _____

_____ Phone: _____
Request Date: _____

School or Department: _____

Purpose for request of fund: _____

Name of Event: _____

Dates of Travel for Event: _____

Location: _____

Complete Budget

Travel	_____
Meals	_____
Housing	_____
Fees/Tuition	_____
Other (specify)	_____
if other explain	_____
Total	_____

Statement of reason for travel or purpose activity and its benefit to you and/or the university.

Other area(s) where request(s) for assistance have/has been requested:

PLEASE PRINT AND SUBMIT TO YOUR SCHOOL DIRECTOR FOR APPROVAL.

Office Use Only	
Total awarded from:	_____
School Funds	Arts! Arts! Arts! Fund
Approval by Director	_____
Director Signature	Date _____

For Dean's Office Use Only	
Authorized: \$ _____	_____
Dean's Signature	Date _____