

## Faculty Travel Assistance Program (FTAP) Awards Program Criteria

1. The travel request must be completed and approved BEFORE any travel has occurred.
2. The requester must be tenure, tenure-track, or renewable term faculty.
3. This is a reimbursement program, and the maximum support through FTAP is \$1,500 per person for domestic travel and \$2,500 for international travel. Once the travel is complete, the department financial administrator will submit a copy of the reimbursement form and the Compass/PeopleSoft financial report showing the expense has been paid. The amount that will be reimbursed is up to the awarded amount, and we will not be able to reimburse any grant/project for travel.
4. If traveling to a conference or performance, the applicant should be **actively participating** (e.g., presenting, chairing a session, performing, etc.) However, if there is a specific reason that the applicant needs to attend, then that case can also be considered.
5. Funds may be used to support active or new research programs (e.g., by visiting with potential collaborators, data collection agency or other funding organization officials, or to conduct research).
- 6. Support will be awarded once every three years per person.**
7. The FTAP program will NOT cover personal or institutional membership fees at conferences.
8. A fixed amount of funding will be allocated quarterly to ensure an even distribution of available dollars throughout the fiscal year. Once available funding is exhausted for a particular quarter, no additional awards will be made until the following quarter. Pending proposals will automatically be carried to the next quarter in the order in which they were received.
9. Requests for reimbursements must be received within 90 calendar days following the completion of the travel. VPRP reimbursement request form [ou.edu/research-norman/quick-links](https://ou.edu/research-norman/quick-links) with Compass/PeopleSoft financial reports are to be submit to [VPRCommitmentBackup@ou.edu](mailto:VPRCommitmentBackup@ou.edu).
10. Faculty should submit a request that includes:
  - a. A completed and signed Request for Travel Funds form.
  - b. A narrative, not to exceed one single-spaced page, describing the nature of the travel (e.g., to present at a national conference or to collect data in the field), the activities to be performed during the trip, the manner in which the travel will enhance active or new research projects for the traveler and an explanation of why funding is being sought from the Office of the Vice President for Research and Partnerships (e.g., rather than from an externally funded grant or contract should one be available to the traveler). If no external grants are available, please state this explicitly in the narrative.

# VPRP Request for Travel Funds (FTAP)

(must be submitted prior to travel)

## General Information

Dept./Div./School: \_\_\_\_\_ OU ID#: \_\_\_\_\_  
Faculty Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Academic Title: \_\_\_\_\_  
Travel Dates: \_\_\_\_\_ Travel Destination: \_\_\_\_\_

## Estimated Travel Expenses (current mileage rates)

Airfare	= _____	Local Transportation	= _____
Public Transportation	= _____	Parking	= _____
Meals & Incidentals ( <i>per diem</i> )	= _____	Other ( <i>describe below</i> )	= _____
Lodging	= _____		_____
Registration	= _____	<b>Total Estimated Cost</b>	= _____
Mileage	= _____		

**Attach a narrative that must state the reasons for travel, how the travel will enhance scholarly activities and why funding is being sought from the VPRP. FTAP does not support travel to attend a professional conference at which a presentation is not being made or travel to attend non-scholarly meetings.**

## I will be traveling to: (*select all that apply*)

Present at a National Conference Conference Name: \_\_\_\_\_  
Present at a Regional Conference Conference Name: \_\_\_\_\_  
Meet with a program officer  
Build collaborations with colleagues at other institutions  
Other (please specify): \_\_\_\_\_

**Other funding support:** \_\_\_\_\_

	Signature	Date	Commitment Amount
Faculty			
Director/Chair/Dept./School			
Return this signed form to <a href="mailto:vprpadmin@ou.edu">vprpadmin@ou.edu</a>			
VPRP Representative			