Lehman College
Travel Budget and Justification Form

1. Amount of Request: $____________

2. Faculty Member Information:
   Name: __________________________________________
   Rank or title: _____________________________________
   Department/Program: ______________________________
   Email address: ____________________________________
   Cell Phone #: ___________________ Office Ext #: __________

3. Purpose of travel:
   Name of Sponsoring Organization: ______________________
   Location of Workshop/Conference: ______________________
   Dates of Conference: ___________ Dates of Travel: ___________

   While attending the conference/exhibit/recital will you be presenting/exhibiting/performing or facilitating/moderating/chairing a session?
   Y _____ N _____ Not Applicable _____

   Describe below your proposed activities and how they impact the College mission, departmental strategic plan, and your teaching or scholarly program of work (attach up to one additional sheet).
4. Please describe the arrangements for covering your teaching, advising and other commitments during travel dates.

5. Sources of travel funding:
Are you receiving funding support from other sources for this trip?

Y _____ N _____

If yes, please list the name of the source and $ amount:

Source: ___________________________ $ Amount

Dean’s Office
PSC CUNY
Department
Grant funding (account #) ___________________________ 
Personal contribution
Other (please specify) ___________________________ 

Lehman College  
Faculty Travel Funding Request

6. Budget

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lodging cost per day</td>
<td>$____________</td>
</tr>
<tr>
<td># of days</td>
<td>$_________</td>
</tr>
<tr>
<td>Mileage # of travel miles @ .0575</td>
<td>$_________</td>
</tr>
</tbody>
</table>

http://www.osc.state.ny.us/agencies/guide/MyWebHelp/Content/XIII/4/C.htm

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Roundtrip air or train fare</td>
<td>$_________</td>
</tr>
<tr>
<td>Registration Fee</td>
<td>$_________</td>
</tr>
<tr>
<td>Other (itemize below)</td>
<td>$_________</td>
</tr>
</tbody>
</table>

Amount of Total Request $_________

__________________________________________  
Signature of Faculty Member               Date

__________________________________________  
Signature of Department Chair              Date

__________________________________________  
Signature of Dean                            Date

__________________________________________  
Signature of Provost                         Date