Crisafulli Fund Application Cover Sheet

The Crisafulli Fund is a competitive fund. To be eligible, faculty must have already received funds from the Faculty Leadership Fund and the Faculty Professional Travel Fund within an academic year. Please see full details on Utica University's Faculty Resources Committee Information web page.

The Crisafulli Fund will provide up to two awards with a **maximum reimbursement of \$2,250**. The application deadline is **March 16**th of the fiscal year.

Please note that Utica University's Travel Policy requires that all receipts for all expenses incurred during travel must be submitted with a completed Travel Expense Voucher upon two weeks from travel end date.

| Applicant: | Date: |
|--|---|
| 1. Purpose of trip: | |
| 2. Location of event: | |
| | |
| | |
| | , for funding from any other source? |
| a. If yes, from where? | |
| b. If already awarded, total other fun | ding: |
| 6. Attach an explanation of how this event fits | into your overall plan for professional development. |
| 7. Attach a current Summary of Professional A | ctivities. |
| 8. Attach an itinerary and contact information semergency. | so that the University can contact you in the event of an |
| Estimated Budget: | |
| Transportation: | |
| Lodging: | |
| Meals: | For FRC Use: |
| Registration: | |
| Miscellaneous: | |
| Total Estimated Amount: | Total Estimated Award: |

^{**}Note: Your School Dean's signature is <u>required</u> on this application for authorization of travel if NO ADVANCE is requested. If you are requesting an advance, please submit a Travel Authorization and Advance Form, along with receipts, with this application.**