

**Title III Request for Professional Development Assistance/Travel Authorization Checklist**

Traveler's Name: \_\_\_\_\_

**ATTENTION:** This checklist serves as a guide to submit a detailed Request for Title III Professional Development Assistance/Travel Authorization. This REQUEST is contingent on availability of funds, strength of justification and approval. Please provide all requested documents listed below. **Incomplete requests will be returned.**

1. Completed Title III Request for Professional Development Assistance form/Travel Authorization form

- For Faculty:
  - Signature of Supervisor or Chair is **REQUIRED**
  - Signature of Dean is **REQUIRED**
  - Signature of V.P. for Academic Affairs is **REQUIRED**
- For Staff
  - Signature of Immediate Supervisor/Director and Corresponding V.P. is **REQUIRED**

2. The following must be submitted (**if requesting advance payment by Title III**):

- Registration Information (include a copy of the invoice/registration confirmation and Vendor ID [A#])
- Airfare (only include if you would like your ticket purchased in advance, by Title III)
  - Secure flight on [www.egencia.com](http://www.egencia.com)
  - Include flight itinerary
- Car Rental (Contact Purchasing Office AFTER PRIOR APPROVAL OF TITLE III OFFICE)

3. Supporting Documentation

- Hotel Estimate
- Conference/Workshop announcement and agenda
- Copy of flight itinerary or mileage details, if driving
- [Meals & Incidental Expenses \(GSA\)](#) print out
- Misc. (Baggage, Airport Parking, Hotel Parking, Taxi/Shuttle Fee)

**NOTE THE FOLLOWING:** *See Guidelines and Procedures Manual for complete listing of requirements for assistance.*

- Assistance will not be provided to present at a conference, serve on a committee or preside at a meeting.
- Request for travel funds should be made at least thirty (30) business days prior to anticipated travel.
- Request will only be considered from (beginning of fiscal year) October 1 through May 1, deadline.
- Do not make any final arrangements before approval of request.
- Secure all **REQUIRED** signatures before submitting to the Title III Office.
- Airline requests made less than thirty (30) days prior to travel will not be approved.
- Airline ticket amounts exceeding \$550 will not be approved by the Title III Office.
- Efforts should be made to make advanced travel arrangements to reduce costs, (i.e. Earlybird Registration)
- Travel Reimbursement documents should be submitted within fourteen (14) days after return from travel.

**\*Please attach your checklist to your Request for Professional Development Assistance/Travel Authorization Request.**

Traveler's Signature \_\_\_\_\_ Date: \_\_\_\_\_

### REQUEST FOR TITLE III PROFESSIONAL DEVELOPMENT ASSISTANCE

- Efforts should be made to make advanced travel arrangements to reduce costs, (i.e. Earlybird Registration).
- Requests for travel funds should be submitted to the Office of Title III, with required signatures at least thirty (30) working days prior to anticipated travel.** Requests for travel funds submitted to the Office of Title III less than thirty (30) days prior to travel **will not be approved.**
- Requests for airline tickets should be made at least thirty (30) working days prior to travel.** Airline ticket requests submitted to the Office of Title III less than thirty (30) days prior to travel **will not be approved.**
- The Office of Title III will only fund airline tickets that do not exceed five hundred fifty dollars (\$550).** Amounts exceeding \$550 **will not be approved.**
- REIMBURSEMENTS: Report on Professional Development Activities form MUST BE INCLUDED, before** reimbursement can be processed.
- Travelers must submit original travel expense receipts within fourteen (14) days after return from travel to the Title III Office. Reimbursable original receipts must be documented.

Name of Requester:		Job Title:	
Office Extension:		Highest Degree Held:	
E-mail Address			
Name of College/Department/Unit:			
Number of years at the University:		Eligibility: Must be employed full time for at least 9 months (for faculty) and 12 months (for staff).	
Title of Workshop /Conference/Class: <i>(Please attach copy of Announcement)</i>			
Date(s):		Location:	
<b>REQUIRED:</b> <i>(Complete page 2 – AAMU Strategic Priority and Goal Support form)</i> . Provide a brief summary of how this assistance will support the <a href="#">Strategic Plan of the University</a> . Include specific and tangible examples of how this will be documented.			
<b>Latest University Travel Policies Apply</b>		<b>ESTIMATED EXPENSES</b>	<b>COST</b> <i>(Enter dollar amounts below):</i>
<u>Additional Comments (if applicable):</u>	<i>(Check one)</i>	<i>(Check one)</i>	
	Adv. Payment: Reimbursement:	Airfare: Car Mileage:	
	Adv. Payment: Reimbursement:	Registration:	
		Lodging/Hotel:	
		Meals:	
	Taxi/Other:		
	<b>Total</b>		

**Required Signatures must be obtained and form submitted to the Office of Title III at least 30 days prior to travel.**

\_\_\_\_\_  
*Signature of Traveler*                      *Date*                      *(For Staff/Faculty) Signature of Supervisor/Chair*                      *Date*

\_\_\_\_\_  
*(For Faculty) Signature of Dean*                      *Date*                      *(For Staff/Faculty) Signature of Corresponding Vice President*                      *Date*

**Title III Professional Development Assistance Approval**

\_\_\_\_\_  
*Title III Director*                      *Date*                      *President*                      *Date*

**Title III Action**

Assistance Awarded                      Amount: \_\_\_\_\_                      Date: \_\_\_\_\_  
  
 Assistance Denied                      Reason for denial: \_\_\_\_\_



# ALABAMA A & M UNIVERSITY

## TITLE III Strengthening Grants Program

### AAMU STRATEGIC PRIORITY AND GOAL SUPPORT FORM

**University Strategic Priorities and Goals that Professional Development Assistance/Travel supports:**

*(List strategic priority # and goal #; i.e. "Strategic Priority 6 – Goal 4")*

Provide summary of how this assistance will support the [Strategic Plan of the University](#). Include specific and tangible examples of how this will be documented.

**Additionally, describe below, how participation in this professional development activity supports your unit/department and how it aligns with your current job title/description/duties:**