# FACULTY TRAVEL GRANTS

## General Information

- **Name**: 
- **Title**: 
- **Department**: 
- **College**: 
- **Phone**: 
- **Campus Address**: 
- **U of M ID number**: (University requirement for reimbursement)

## Project Proposal

- **Place/Country of Destination**: 
- **Dates of Travel**: 
- **Brief Description of activity**: 

## Budget Summary

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total travel expenses</td>
<td>$</td>
</tr>
<tr>
<td>Matching Funds confirmed</td>
<td>$</td>
</tr>
<tr>
<td>Matching Funds pending</td>
<td>$</td>
</tr>
<tr>
<td>Travel Grant request (maximum award: $1500)</td>
<td>$</td>
</tr>
</tbody>
</table>

## Signature

- **Signature**: 
- **Date**: 

### Attachments

- A one-page proposal describing the activity

Return to: Klaas van der Sanden, Program Coordinator, African Studies Initiative, asi@umn.edu