

**KENT STATE UNIVERSITY AT TUSCARAWAS
SUPPLEMENTAL TRAVEL REIMBURSEMENT**

(NOTE: This form does not replace the travel pre-authorization form. **Please return this form to the Dean's Office.**)

Supplemental Travel Reimbursement refers to travel support provided by Kent State University Tuscarawas Campus in addition to the annually allotted Professional Development Funding for all tenure-track, tenured, and full-time non-tenure-track faculty members each academic year. The Faculty Council and the Campus Dean will use the following guidelines to review a request for supplemental travel reimbursement.

1. As required by the University Travel Policy and Tuscarawas Campus Handbook (IV 1.8), all requests for supplemental travel reimbursement should be filed with the Request for Absence Form at least two weeks prior to the absence/travel. There is a limit of \$1500 per conference/event for supplemental travel reimbursement. However, a faculty member may request to have any additional amount over the \$1500 also reimbursed if there is any money left in the supplemental travel reimbursement account at the end of the academic year.*
2. There is a hierarchy for the extra travel reimbursement based on the reason for the travel. **Please attach the necessary documentation to support your application.**
 - a. 100% reimbursement for presenting a paper, chairing a panel, or serving as panel discussant/commentator at a conference;
 - b. 80% reimbursement for a trip involving data collection or archival research or conference planning/organization; and
 - c. 60% reimbursement for attendance at a conference.
 - d. Other travel reimbursement will be considered by the FC, who will examine documentation submitted and suggest the appropriate reimbursement tier based on the faculty member's role during that travel.
3. First request from any faculty member will have the highest priority in the review and approval processes for supplemental travel reimbursement if funds are still available. If there is money left in the fund after April 1, additional requests* for supplemental travel reimbursements from any faculty member will be acted upon by the Faculty Council, based on the time when the requests are submitted.
4. All supplemental travel requests must be awarded from the supplemental fund for the fiscal year in which the conference/event occurs.
5. Although the Faculty Council will review supplemental travel reimbursement applications and make recommendations, the Campus Dean makes the final decision to approve or reject a reimbursement application.
6. Faculty Council will review all applications received during a given month at the next scheduled faculty council meeting. If there is a long period between faculty council meetings, requests can be discussed and voted on via email. Any requests approved during these time periods will be reported at the next scheduled faculty council meeting.

Printed Name: _____

Signature: _____

Date: _____

*Requests submitted 60 days past the travel date are subject to taxation based on IRS code.

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SECTION 1 – To be completed by faculty member.

Name: _____ Date of request: _____

Destination: _____

☐ First Supplemental Reimbursement Submission ☐ Additional Supplemental Reimbursement Submission

Purpose: ☐ Presenting/chairing/commenting at Professional Conference (100%)
Name of organization: _____ **Attach Supporting Documentation.**
☐ Research, data collection, archival research (80%)
☐ Attendee at professional conference (60%) – Name of organization: _____
☐ Other – Specify purpose and role: _____

Proposed Absence Dates	Class Absence Date Class	Class Arrangements
_____	_____	_____
_____	_____	_____

Estimate cost:

Transportation (Mode of travel: _____)	\$ _____
Lodging	\$ _____
Meals	\$ _____
Registration Fee	\$ _____
Other – Specify: _____	\$ _____
Total Estimated Cost	\$ _____

Have you requested funding from another source? ☐ Yes ☐ No
If Yes, state from whom. (URC, UTC, FTNTT Prof Dev Pool, etc.) _____
If No, state why not. _____

SECTION 2 – To be completed by the Business Office.

Total Estimated Cost (from Section 1)	\$ _____
Amount remaining from professional development	\$ _____
Amount received from other sources	\$ _____
Amount requested from supplemental travel fund (limit \$1500)	\$ _____ X _____ = _____ (Total) (Percentage) (Requested Amount)

SECTION 3 – Authorization by Campus Dean: _____

- ☐ Full reimbursement in the amount of \$ _____
☐ Partial reimbursement in the amount of \$ _____
☐ No reimbursement at this time but resubmit at the end of the academic year for possible additional funds.
☐ No reimbursement.