

JCJC FOUNDATION, INC.
FACULTY ENRICHMENT GRANT APPLICATION

NAME: _____

DIVISION: _____

Courses taught: _____

Beginning Date of Full-time JCJC Employment _____

PROPOSED PROJECT: (Please give an overview along with explanation of expected benefits in relation to teaching performance.)

Please attach supporting information such as brochure, journal announcement, individual invitation, etc. for the benefit of the selection committee.

JCJC FOUNDATION FACULTY ENRICHMENT GRANT

**JCJC FOUNDATION FACULTY ENRICHMENT GRANT
REQUEST FOR FUNDS**

NAME: _____

DATE OF REQUEST: _____ **DATES TO BE USED:** _____

DIVISION: _____

DESCRIPTION OF TRAVEL

(A flyer or brochure, etc. with cost information must be attached to this request.)

Destination (City, State) _____

Purpose of Travel _____

Mode of transportation: ___ College Car ___ College Van ___ Personal Car ___ Air ___ Other

If traveling by public carrier, how will you travel to terminal? _____

Round trip mileage if traveling by car or van _____

Name/Address of lodging accommodations _____

Depart date _____ Depart from base _____ am/pm Carrier departs _____ am/pm First Req. Meal B L D

Return date _____ Arrive at base _____ am/pm Carrier arrives _____ am/pm First Req. Meal B L D

ESTIMATE OF EXPENSE

Room/Meals: Regular meals, including tips \$ _____

Hotel \$ _____ x _____ = _____

Travel: _____ miles @ _____ cents/mile _____

Public carrier _____

Taxi/Shuttle Bus _____

Fees: Registration _____

Other _____

TOTAL FUNDS REQUESTED: \$ _____

Person making request: _____

Division Chair: _____

Dean: _____

College President: _____ (This signature secured by JCJC Foundation staff.)