

FACULTY REQUEST FOR RAC FUNDS

Attach Additional Pages as Needed

NAME: _____

Reason for Request: _____

Justification for request:

Budget:

FUNDING SOURCES: TYPICALLY RAC DOES NOT PROVIDE MORE THAN ONE-THIRD OR \$500 FOR DOMESTIC TRAVEL		
RAC		(requested amount)
DEPARTMENT		(approved or requested?)
OTHER		(identify)
TOTAL	\$	-

COMMENTS/ADDITIONAL INFORMATION:

DEPARTMENT HEAD APPROVAL: _____ **DATE:** _____

NON-TRAVEL SUPPORT IS TYPICALLY LIMITED TO \$500 EVERY OTHER FISCAL YEAR.