

University of Massachusetts, Amherst
College of Natural Sciences
Dean's Office
Pre-Tenure Travel Request

NAME: _____ <div style="display: flex; justify-content: space-around; width: 100%;">(Last)(First)</div>		TITLE: _____	
DESTINATION: _____			
DATE OF DEPARTURE: _____		DATE OF RETURN: _____	
PURPOSE OF TRIP: _____ _____ _____			
ESTIMATED COST: \$ _____ Travel costs not to exceed \$800.00.			
_____ <i>Signature</i>		_____ <i>Approval Signature Sally Powers, Associate Dean of Faculty Development, CNS</i>	
_____ <i>Date</i>		_____ <i>Date</i>	
<p>Please note that a short report evaluating the sponsored travel is required upon your return in order to process the reimbursement. Reports should be forwarded to Associate Dean Sally Powers, c/o Amanda Leigh-Hawkins, 107 Stockbridge Hall or aleigh@cns.umass.edu upon completion of the trip.</p>			
<div style="display: flex; align-items: flex-start;"><div style="margin-right: 20px;"><input type="checkbox"/> Report Evaluation Receipt</div><div><input type="checkbox"/> Report Submission Date _____</div></div> <p>Be sure to obtain prior written or electronic supervisory approval. It is required for university travel and must be submitted with travel reimbursement forms (TRIP forms). Printed email approval containing the same information may be substituted for that form. Check with your department business manager.</p>			