**Department of Spanish and Portuguese**

**Faculty/Staff/Student Funding Request Application**

**Instructions:**

* The application must be submitted at least 30 days in advance.
* Submit the completed application to Fabiola Parra via email [fabi@unm.edu](mailto:fabi@unm.edu) or in Ortega Hall Room 235D.
* You will receive a decision via email. If awarded, you will be notified of the exact amount.
* Must submit original receipts in order to obtain reimbursements.
* Travel receipts must be submitted within **fifteen (15) days** after the travel is completed. Non-travel receipts (copies, food for event, etc.) must be submitted within **five (5) days** after the purchase.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Applicant Information | | | | | | | | |
| Today’s date: | | | | | | | | |
| Name: | | | | | Email: | | | |
| Position at UNM: Faculty\_\_\_\_ Staff\_\_\_\_ Student\_\_\_\_ | | | | | | | | |
| Purpose of funding application: Travel Support\_\_\_\_ Event\_\_\_\_ | | | | | | | | |
| travel support funding - *ONLY* | | | | | | | | |
| Reason for Travel:  \_\_\_ Paper Presentation \_\_\_ Session Chair/Moderator  \_\_\_ Conference Chair/Executive Board Member \_\_\_ Poster session  \_\_\_ Panel Participant \_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | |
| Name of Conference: | | | | | Conference Website: | | | |
| Travel Destination (City, State): | | | Departure date: | | | | Return date: | |
| Title of paper/panel: | | | | | | | | |
| event funding - *only* | | | | | | | | |
| Title of event & Brief Description of Event: | | | | | | | | |
| Date and time of event: | | | | Location of event: | | | | |
| Estimated size of audience: | | Type of audience (faculty, student, staff, and/or community members) : | | | | | | |
| Name of Speaker(s) & provide an overview of speaker’s background: *(CV must be submitted along with this form)* | | | | | | | | |
| BUDGET | | | | | | | | |
| **List of Expenses** | **Requested from S&P** | | | | **Requested from other Sources** | | | **Total Cost** |
| Airfare |  | | | |  | | |  |
| Lodging |  | | | |  | | |  |
| Per Diem *(guest only)* |  | | | |  | | |  |
| Registration |  | | | |  | | |  |
| Honorarium |  | | | |  | | |  |
| Publicity |  | | | |  | | |  |
| Other |  | | | |  | | |  |
| Other |  | | | |  | | |  |
| **TOTAL:** | | | | | | | |  |
| **Budget Justification**  Please explain how the money requested from S&P will be used: | | | | | | | | |
| Signature | | | | | | | | |
| Signature of applicant: | | | | | | Date: | | |
| FOR dEPARTMENT USE ONLY | | | | | | | | |
| Date: | | | | | | | | |
| Funding Amount approved: | | | | Funding Source: | | | | |
| Funding Declined-Reason: | | | | | | | | |