

Center for Teaching and Learning
SPEAKER SERIES GRANT APPLICATION Proposal Form
2020-2021

Faculty Member's Information:

Name: _____ Campus Address: _____
Preferred Prefix: Dr. ____ Mrs. ____ Ms. ____ Mr. ____ Email: _____
School of: _____ College: _____
Office Professional: _____ Email (OP): _____

Presentation Summary: Please complete the information below. If you are requesting funds for more than one speaker, please complete the information for each speaker. Add attachments as needed.

Speaker's Name: _____
Title of Speaker's Presentation: _____
Speaker's Credentials (attach resume, or give URL): _____
Date(s) of Presentation: _____

Presentation Description: Please provide a brief description.

Justification: Please provide justification of the need for the presentation and explain how it supports UCM's mission.

Estimated Budget:

Please complete the budget information for each speaker, and **attach documentation** of reservations, registrations, travel, etc.

	DESCRIPTION	ESTIMATED EXPENSE
Honorarium		
Transportation		
Lodging		
Meals		
Other		
	TOTAL	

Additional Sources of Funding? Yes ____ No ____

School: \$ _____

Other: \$ _____

College: \$ _____

Faculty Member's Signature

Date

School Chair's Signature

Date

Dean's Signature

Date

Please submit this completed application to:

Kim Anthes, Budget Coordinator anthes@ucmo.edu JCKL 2230 660-543-4145

CTL USE ONLY: CTL Funding: ____ No Award ____ Funds Awarded - Amount \$ _____

Director, Center for Teaching and Learning

Date