Faculty Evaluation for Travel Grant Applicants

Graduate and Professional Student Association



Instructions

| | · · · · · · · · · · · · · · · · · · · | | | | who is applying for t in their application | |
|------------------------------|---|--------------------|--------------------|-------------------|---|-----------|
| | | | | | | |
| Student Name | | | | | | |
| Faculty Eva | luation | | | | | |
| This portion sl | hould be completed | d by the departr | nent chair or ma | ajor professor. | | |
| Name of Conf | erence | | | | | |
| Date of Confe | rence | | | | | |
| Conference Ti First Tier/Fla | i er agship 🗌 Second T | ier 🔲 Third Tier | /Other | | | |
| Please rate the | importance of the co | onference activity | to the student's p | rogram of study a | nd/or professional dev | elopment. |
| | 1 | 2 | 3 | 4 | <u> </u> | |
| | Not Important | | | | Very Important | |
| Date | | | | | | |
| | ee to the information per funds explained in th | • | _ | | ot receiving additional | funding |
| | | | | | | |
| Signature | | | | | | |

Please provide manual signature. If a manual signature cannot be provided, then provide an electronic signature. The student must provide the email with the date and time stamp that was sent by the professor as confirmation. This should be uploaded with the application. The student's name should be redacted from emails upon submission of their application.