

# Faculty Travel Procedures Effective July 1, 2024

1. **Guidelines for Requesting Funds from A**
	1. *All full-time faculty* are eligible for a professional development trip for up to four consecutive days within the fiscal year. It is permissible to take more than one trip. Trip funding is contingent on available resources.
	2. Percentage represents total support requested from “A” funds in USCL’s professional development budget (#52024).
		1. 100% support for faculty presenting, serving as a discussant, or chairing a session.
		2. Up to 80% support for faculty attending conference sessions, but not on the program.
	3. Mileage reimbursements for single-day regional travel relating to USCL sponsored activities are not considered as part of this process. Those will be evaluated on a case-by-case basis.
	4. Travel Study programs are not considered as part of this process.
	5. Travel funds for research should be requested through separate grant applications.
2. **Request Process**
	1. November 15: Deadline for faculty to submit the Faculty Travel Request Form to the Division Chair.
	2. March 15: Deadline for faculty to submit additional requests beyond the first approved request.
	3. If more than one request is being made for the fiscal year, the faculty member should indicate which professional travel opportunity has priority.
	4. If approved by Division Chair and Associate Dean, Division Chairs shall notify the faculty member and forward the Travel Authorization Form to the Associate Dean.
	5. The Associate Dean submits the approved Travel Request Form to the Business Office for processing.
	6. Traveler will receive a link via e-mail to approve the submitted travel authorization.
	7. From there, the form goes to the Dean, then the Business Office, the USC Travel/Controller’s Office.
	8. Once the traveler returns from the trip, the traveler will submit all receipts to the Business Office for reimbursement. The receipt must be submitted within 30 days of return or, in the case of June travel, before the end of the fiscal year (July 1).

Faculty Travel Request Form

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| **FACULTY INFORMATION** |
| FIRST NAME |  | LAST NAME |  |
| EMAIL ADDRESS |  |
| USC ID |  |
| TRAVEL INFOMATION |
| TRAVEL START DATE |  | TRAVEL END DATE |  |
| CITY |  | STATE |  |
| COUNTRY |  |  |
| TRAVEL PURPOSE please provide details about the travel including its contributions to scholarship, teaching, or service. |  |
|  |
| ESTIMATED EXPENSES |
| REGISTRATION FEE |  | HOTEL |  |
| AIRFARE |  | AUTO RENTAL |  |
| PARKING |  | # OF MILES DRIVING IF PERSONAL VEHICLE |  |
| MEALS/PER DIEM |  | OTHER |  |
|  |  |  |  |
| TOTAL PROJECTED BUDGET |  |
| SOURCE OF FUNDS |
| Grant funded\* | Yes  | No |  |
| DEPT |  | GRANT FUND |  |
|  |  |  |  |
| If not grant funded |  |  |  |
| DEPT | 945505 | A FUND | A0001 |