

Name: _____ Date submitted: _____

Department: _____ Activity Dates: _____

Meeting or Project Name: _____

Location: _____

Does this trip include international travel with a student? Yes No If yes, please see below:

<http://www.whitman.edu/content/ocs/faculty/faculty-led-trips>. Whitman College **requires** the faculty-trip leader to have a cell phone with international capability with them on the trip. If the faculty trip leader's US cell phone does not have international capabilities, you may rent a phone from Cellular Abroad or another service provider. Please note that trip leaders should be sure to include the cost of the cell phone in your trip budget.

Please indicate the nature of your funding request by checking one of the below:

A. Professional meeting, workshop or conference.

• Will you be presenting? Yes No

Title of paper to be presented:

• Will you be chairing a session or performing a professional leadership role? Yes No

Title of session to be chaired or description of role:

• Other role at the meeting (please describe, explaining the significance of attending):

B. Scholarly or Research Project:

Describe the project and its significance, and provide a rationale for the location and duration of the project.

What scholarly results do you anticipate from this project (publication, performance, other).

C. Instructional Development Project

Describe the project and in what way it will benefit the learning of students in your courses.

Itemized anticipated expenses

1)	Airfare:	\$		7)	Parking/Ground Transportation:	\$
2)	*Lodging:	\$	(# nights @ \$)	8)	Other:	\$
3)	*Meals:	\$	<i>Total estimated costs for this trip:</i>		\$	<i>Add lines 1 to 8</i>
4)	Registration:	\$	<i>Minus PDA Funds applied to this trip (if any):</i>		\$	
5)	Car Rental:	\$	<i>Minus other funding, (if any): (Example: Dept., grant, IDC, etc.)</i>		\$	
6)	Mileage: (if relevant)	\$	<i>Total ASID funding request:</i>		\$	

Do you have other support for this work? Yes No *If yes, please explain, and provide in the itemized anticipated expenses above:*

**Maximum allowance for food is \$75 per day and no more than \$450 in one trip. Lodging cannot be in a VRBO or AirBnB and should be less than \$300 per night.*

PDA FUNDS ALLOCATION: (If applicable)

Please summarize how you have used, or plan to use, your PDA funds, accounting for the full \$2,000 allocated for 2024-25 and any ASID funds you received earlier in this academic year. It is each faculty member’s responsibility to track their own spending; using records from Chrome River submissions can be especially helpful for tracking. This section must be completed in order for the ASID Committee to consider your request.

<u>Activity</u>	<u>Date</u>	<u>Amount</u>
		\$
		\$
		\$
		\$

Results of ASID funding

Please list concrete and specific ways that your most recent ASID funding helped to enhance your capacities as a teacher-scholar, impacted student learning, or had a public impact.

Complete a separate form for each meeting or project. We encourage you to include a summary of your ASID-funded activity in your annual activity report.