Faculty Evaluation for Travel Grant Applicants

Graduate and Professional Student Association



Instructions

grant funding. Th	is form should b	oe returned to t	he student so th	ey can include i	who is applying for t t in their application th their application r	. Please
Student Name						
Faculty Evalua	ation					
This portion shou	ld be completed	d by the depart	ment chair or ma	ajor professor.		
Name of Confere	nce					
Date of Conferen	ce					
Conference Tier First Tier/Flagsh	nip 🗌 Second T	ier 🔲 Third Tie	r/Other			
Please rate the imp	ortance of the co	onference activity	to the student's p	rogram of study a	nd/or professional dev	elopment.
	1	2	3	4	5	
Not Important					Very Important	
Date By signing, I agree to other than those fur		oresented on this			not receiving additional	funding
Signature Please provide man	ual signature. If a r	manual signature	cannot be provided	l, then provide an	——electronic signature. The	e 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.