

Application for Supplemental Funding

Name	
Name:	
Title of Presentation:	
Name of Conference:	
Trume of comercine.	
Location of Conference:	
Dates of Travel:	
E. Le Parence	
External Funding Source:	
(Note, please provide copy of paper acceptance letter and any award letter for external travel funding	g.)
Budget:	
***Please note that departmental supplemental funds will be awarded based on available budget	
received. The Department of Arts Administration, Education and Policy cannot guarantee funding f	
Requests must be received two weeks prior to conference dates, as funding will not be awarded po	st-conference.***
For Office Hee Only	
For Office Use Only	
AAEP Business Manager Approval:	
AALF Busiliess Maliagei Approvai.	
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Michelle Attias, MHRM, PHR	Date