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**Travel Report Form**

**(Submit with STE)**

**Office of Title III Programs**

Vail Hall, First Floor

Phone: 484-365-7293

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| Traveler’s Name: | Date: |
| Department: | **Grant Name:** |
| Conference/Seminar/Workshop Course/Class Information: | |
| Name/Title: | |
| Date(s): | |
| City/State: | |
| As a result of this travel, I received . . . (Check All That Apply)  Training in educational technology  Training in new or alternative teaching techniques  Training in developing new curriculum  Training for developing teaching techniques  Fellowship or other assistance to attain advanced degree  Training in developmental activities (seminars, workshops, etc.)  Professional development training designed to improve academic quality  Professional development training designed to improve job performance  Training in how to use new administrative management systems  Certification or license in  Other, please explain | |
| Objectives: | |
| Please provide a brief summary describing how the meeting assisted in accomplishing the objective(s): | |
| Observations: | |
| Recommendations or plan of action as a result of attending conference, workshop, seminar, course, and/or class: | |
| Other:  On the last page of this form and in whatever format that will work for you, please provide specific narrative on how the Title III sponsored travel has or will assist you in performing your professional duties. Give examples and provide quantitative data, such as how many students and or professional colleagues will benefit from training. Please share with us how this has helped you in preparing lectures, classroom assignments and/or performing administrative duties. How have our students benefited? Also, please include specific information you have been able to share with your collages at LU through forums, presentations, seminars, or workshops. Be sure to give the number of colleagues that have benefited from the training you received.  Attach any supporting documents | |
| Traveler | **Date** |
| Activity Director | **Date** |

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| --- |
| Other: |