

**NORTHWEST UNIVERSITY
FACULTY ENRICHMENT ASSISTANCE**

Proposal for Faculty Enrichment Assistance Funding

Faculty Name _____

Nature of Enrichment Assistance _____

Place of Meeting/Activity _____

Dates of Meeting/Activity _____

Nature of Resources/Materials _____

Values and Benefits Expected (Explain the nature of the enrichment assistance request, and its value and benefit to your professional development).

Estimate of Costs*

Fees _____

Materials/Resources _____

Travel _____

Food _____

Lodging _____

Other _____

TOTAL _____

*A report of actual costs related to this proposal must be submitted to the Academic Affairs Office on the TRAVEL EXPENSE ANALYSIS FORM for final accounting purposes.

For Administrative Use Only

Preliminary Approval by Dean

Date

Funding Approval by Provost

Date