

Proposal: Primary Care Grants for Professional Travel

**Approved by Dean's Council
May 5, 2015**

Attending professional meetings is critical to career advancement in terms of getting one's work recognized, learning about the work of others, networking, learning new skills, and participating in professional service. When the attendee is the primary caregiver for an adult or child, these responsibilities present an additional hurdle to attending meetings. While childcare sometimes is provided at meetings, it is usually at a substantial cost. These additional costs for child or elder care are not often reimbursable by federal grants or state accounts. For faculty and staff professional travel outside of Brazos County, the College of Education and Human Development will provide small grants to cover additional travel costs associated with primary care needs.

Any faculty or staff wishing to take advantage of such assistance must submit a Primary Care Application Form. The requested amount of support must be justified up to the maximum available of \$500* per family per event. Funding is limited to one award per person per calendar year, and the event must be out of Brazos County. While applications will be accepted on a rolling basis, the requests will be evaluated by a committee of Faculty Advisory Council members for faculty requests and Staff Advisory Council members for staff requests. Requests can be submitted either before or after the travel, but receipts are required and must be turned in. Reimbursement will not be possible until all receipts and the application form have been submitted.

There is a limited pool of funds. In the event that the number of requests for grants exceeds the funding available, preference will be given to applicants in the early stages of their careers.

Applications are accepted on a rolling basis and are reviewed by the committee in **October, February, and May annually.**

Please forward application materials to Lizzie West at emwest@tamu.edu

*Please note these funds will be paid as a supplemental check. The money is considered as additional income, and the appropriate taxes will be taken out.

Primary Care Application Form

Name:

Current position:

Department:

Email:

Phone:

Mailstop:

Departmental person handling travel reimbursement and their phone number:

Please provide the following information about your travel:

1. How will you use this award? Please select all that apply.
 - Additional care at home during your absence
 - Care at professional conference or meeting venue
 - Travel expenses for individual requiring primary care
 - Travel expenses for caregiver
 - Other related expenses (explain below)
2. Provide information regarding the professional conference or research meeting you will attend (name of conference/meeting, location, dates) and the nature of your participation (talk, poster, session chair, etc.).
3. Describe how this award will assist you in participating in the conference or meeting.
4. Provide a budget for use of the award (up to \$500).

Childcare/Adult care	\$ _____
Airfare	\$ _____
Hotel	\$ _____
Other _____	\$ _____
Total Request	\$ _____