

COLLEGE *for* Creative STUDIES

Visiting Artist Fund Request

All requests must be submitted as hard copies to Katie Pasciolla Executive Assistant to the Provost Office of Academic Affairs. Time sensitive requests may be submitted digitally to kpasciolla@collegeforcreativestudies.edu.

Requests for visiting artist funds will be prioritized in accordance with the needs of the College.

	Semester	Fall	Winter	Summer	
Sponsoring Faculty Name	_____				
Department	_____				
Visiting Artist's Name	_____				
Content/Topic/Title of Presentation	_____				
Intended Audience	_____				
Dates (approximate if not confirmed)	_____				
Student Activity (not required)	_____				

Supporting documentation about the artist/speaker **must** be attached for consideration with a rationale explaining what value their visit would bring to the College.

Anticipated Expenses

	Description	Cost
Honorarium	_____	_____
Lodging	_____	_____
Transportation	_____	_____
Food	_____	_____
Other	_____	_____
Total Anticipated Cost:		_____

If the costs exceed the allotted budget, which budget center should be charged? _____

Applicant's Signature _____ Date _____

Chair's Signature _____ Date _____

Approved Denied Approved Amount _____

Academic Affairs's Signature _____ Date _____

*If approved, you are responsible for completing the necessary travel arrangements and all payment requisitions.

Travelers must adhere to the CCS Travel and Entertainment Policy (Blackboard>Campus Offices>Human Resources>Policies & Procedures). All reimbursement forms must be filed within 60 days of the event. If the trip is canceled, please notify the Academic Affairs Office immediately.