

NORTHERN MICHIGAN UNIVERSITY  
DEPARTMENT OF ENGLISH

Request for Carry Over of Travel Funds to \_\_\_\_\_  
(Fiscal Year)

Name \_\_\_\_\_ Est. Date of Travel \_\_\_\_\_

Amount Requested for Carry Over \_\_\_\_\_

Estimated Total Cost of Travel \_\_\_\_\_

Destination \_\_\_\_\_ Reason (Conference, Etc .) \_\_\_\_\_

Nature of Participation \_\_\_\_\_

Explanation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

.....  
COMMITTEE RECOMMENDATION:

WCC \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

EDEC \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DEPT HEAD \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_  
Working Conditions Chair

SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_  
Executive Committee Chair

SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_  
Department Head