

VIRGINIA STATE UNIVERSITY

TITLE III PROGRAM WORKSHOP ATTENDANCE AUTHORIZATION FORM

_____ is hereby authorized to

attend the _____

workshop to be held at _____

(Location)

in _____

(City/State)

on _____.

(Date)

Justification for Attendance/Benefit to University: _____

For travelers who are faculty members, the following signatures are required.

Signed: _____ Date _____

Chairperson

_____ Date _____

Dean

_____ Date _____

Provost

For travelers who are administrators, administrative staff, or classified personnel, the following signatures are required.

Signed: _____ Date _____

Supervisor

_____ Date _____

Vice President