



TEXAS TECH UNIVERSITY

Office of the Provost™

Big XII Faculty Fellowship Program Application

Name _____ Faculty R# _____

Faculty Rank _____

College/School _____ Department _____

Campus email address _____ Campus phone # _____

Host University _____

Host Unit _____

Faculty sponsor(s) at host university _____

Dates of visit (between Sept. 1 and Dec. 7; or Jan. 17 and May 9 of the current academic year):

Checklist of items to be attached:

_____ A one-page (≤ 750 words) description of the purpose and activities of your visit

_____ A two-page vita focused on your qualifications for the proposed fellowship

_____ Statement of how your duties will be covered in your absence

_____ Letter of invitation from the proposed Big XII host institution department or school

_____ Signatures of your department chairperson and dean indicating support for the visit

_____ Itemized Budget (transportation, lodging, and meals) not to exceed \$2,500

Signature of Applicant _____ Date _____

Signature of Department Chair _____ Date _____

Signature of College Dean _____ Date _____

Applications should be submitted electronically to the Office of the Provost, (attn: Luciana Cavazos, luciana.c.cavazos@ttu.edu), at least 30 days prior to the applicant's proposed travel dates.