

DEPARTMENT OF MATHEMATICS

FACULTY TRIP FORM

(Fill out if your travel includes one or more teaching days)

Name _____ Date _____

I plan to be away from _____ to _____

at _____

I have made the following arrangements for my classes as indicated below:

Math _____

Math _____

Math _____

Will you be available via email? Yes No

Will you be available via cell phone? Yes No

Cell Phone Number _____

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