

CLAS Graduate Student Request for Travel Funds

Name					Date	
Department						
Date(s) of Trip	(s) of Trip Email					
Destination(s)						
Name of Meeting						
If paper is to be presen	nted, Title	of Paper				
Is the paper/presentat	ion	Invited	Contribute	d		
Status in program:	MA	Pre-qu	ialifying exams		ABD	
Expected date of grad	uation					
Anticipated Costs:			Source of Estin	<u>nate</u>	or Explanation:	
Travel	\$					
Pier diem	\$					
Registration	\$					
Misc.	\$		-			
TOTAL:	\$					
Funds Requested or A	<u>vailable</u> (e	xcluding this	request)			
<u>Source</u>		<u>Amount</u>				
<u>Department</u>		\$	award	ed	requested	
	<u></u>		award	ed	requested	
			award	ed	requested	
			award	ed	requested	
TOTAL		\$				
Total Funds Requested	d from CLA	\S: \$				

In addition to this form, which will be accompanied by the Chair/Director's evaluation, you must submit
additional supporting material (two pages maximum). You may include, for example, an abstract of your
talk and/or a letter to the Committee detailing the importance of your receiving travel support at this
time.

This portion is to be completed by the Chair/Director and the entire application is to then be forwarded to the College Travel Committee. Chairs/Directors are expected to include a cover memo along with applications, which should contain their evaluation of the appropriateness of the request.

Dollar amount contributed by the Department:	Ranking from 1 to 5 (1 being the highest)
\$	
Chair/Director Signature	_