



APPLICATION FOR GRADUATE STUDENT TRAVEL FUNDING

This document is available in alternate formats upon request.

Student Name: _____ Student #: _____
 Department: _____ Master's/Ph.D.: _____
 U of M Email: _____ Phone: _____
 Faculty Advisor: _____
 Conference Name: _____
 Date of Conference: _____ Location: _____
 Name of Paper: _____

Have you received previous travel funding from the Dean's Office? Yes No

If yes, when? _____

BUDGET

Estimated Costs:		Funding Sources:	
COST	AMOUNT (\$)	SOURCE	AMOUNT (\$)
Registration			
Travel			
Accommodations			
Meals			
TOTAL:		TOTAL:	

Please have this form signed by the student's faculty advisor.

I certify that this paper has been accepted for presentation at the above-named conference and this student will be presenting the paper.

Signature of Faculty Advisor

Date

NOTE: The Dean's Office provides up to a total of \$250 per student; once for the Master's program and twice for the PhD program.