

**School of Public and Environmental Affairs
Request for Doctoral Student Travel**

Name _____ Date _____
Email _____ Travel Dates: _____ to _____

Section A (Required)
Meeting Name: _____ Meeting Dates: _____
Meeting Location: _____
Describe the nature and extent of participation:
Significance of the travel to your progress in the program:

Section B (Optional: Complete if you are presenting a paper or poster)																
Do you intend to present a paper? <i>If yes, attach abstract.</i>	Yes	No														
Has it been accepted? <i>If yes, please attach official acceptance.</i>	Yes	No														
Have you given a practice presentation?	Yes	No														
Date practiced or date expected to practice.																
Briefly describe how the presentation will benefit your professional development.																
<table border="1" style="margin: auto; border-collapse: collapse;"><tr><td colspan="2">Estimated Budget:</td></tr><tr><td style="text-align: right;">Registration Fee</td><td style="text-align: right;">\$</td></tr><tr><td style="text-align: right;">Travel</td><td style="text-align: right;">\$</td></tr><tr><td style="text-align: right;">Lodging</td><td style="text-align: right;">\$</td></tr><tr><td style="text-align: right;">Food</td><td style="text-align: right;">\$</td></tr><tr><td style="text-align: right;">Other</td><td style="text-align: right;">\$</td></tr><tr><td style="text-align: right;">Total</td><td style="text-align: right;">\$</td></tr></table>			Estimated Budget:		Registration Fee	\$	Travel	\$	Lodging	\$	Food	\$	Other	\$	Total	\$
Estimated Budget:																
Registration Fee	\$															
Travel	\$															
Lodging	\$															
Food	\$															
Other	\$															
Total	\$															
<table border="1" style="margin: auto; border-collapse: collapse;"><tr><td style="text-align: right;">Amount requested (max. \$925):</td><td style="text-align: right;">\$</td></tr></table>			Amount requested (max. \$925):	\$												
Amount requested (max. \$925):	\$															
Do you have a matching fund?	Yes	No														
If yes, indicate source and amount:																

Section C (Optional: Complete if you are attending a workshop that requires an additional registration fee. You may complete this section regardless of whether you are presenting.)			
Workshop Name:			
<table border="1" style="margin: auto; border-collapse: collapse;"><tr><td style="text-align: right;">Registration Fee</td></tr><tr><td style="text-align: right;">Amount Requested (max. \$200)</td></tr></table>		Registration Fee	Amount Requested (max. \$200)
Registration Fee			
Amount Requested (max. \$200)			

Please attach a copy of any relevant supporting documentation.

Approved by _____ Amount _____
Date _____