IGERT STUDENT TRAVEL APPLICATION FORM

Please TYPE or PRINT

Name:	**Date of Request:**
Social Security Number:	**E-mail Address:**

PURPOSE OF TRAVEL

Name of Conference or Workshop:
Academic field of Conference:
Location:
Dates (include travel days):
Paper Title and Author(s) (attach abstract):
Expected Paper Acceptance Date *(attach copy of acceptance if available)*:

BUDGET SUMMARY (Check with NCGIA Staff for allowable rates)

Transportation (air, car, train, bus, etc.):	Travel Cost:	$
Meals:		$
Lodging: Name of Hotel:	Cost of Lodging:	$
Conference Registration Fee:		$
Other *(please explain)*:		$
TOTAL CONFERENCE COSTS REQUESTED		$
If you have requested funds for this travel from other sources, please name source: Amount requested from this other source:		$

PLEASE ATTACH: **-Copy of Conference Program (section listing your presentation)**
-Copy of paper/presentation title page and abstract

SIGNATURES

_____ _____

Student *Academic Adviser*

Date:_____ Date:_____

Maximum Amt. Approved: _____ *Authorized by:* _____ *Date:* _____

Condiditions _____