

Student Travel Support Program Application

Name _____ Student ID _____

Major _____ Degree Program _____
(Ph.D., MPH, Undergraduate)

Expected Graduation Date _____

E-mail address _____ Telephone _____

Name of conference in which participating: _____
Please attach documentation of participation (acceptance letter, conference program).

Dates of conference: _____

Location of conference: _____

Demonstrate your active SPH service:

Travel Dates:

From: _____ To: _____

Description of participation (including authors and titles of presentations):

Estimated expenses (See <http://financediv.wvu.edu/home/pcps/payment-services/travel-needs> for assistance in calculating travel costs.):

Registration fee	\$ _____
Transportation	\$ _____
Mode of transportation:	
Mileage - _____ @ \$.655 per mile	\$ _____
Lodging/number of nights _____ @ \$ _____	\$ _____
Meals/number of days _____ @ \$ _____	\$ _____
Other - specify _____	\$ _____
TOTAL ESTIMATED EXPENSES FOR TRAVEL	\$ _____
TOTAL FUNDING REQUESTED (maximum \$750)	\$ _____

(Continued)

Identify additional funding sources:

Personal	\$ _____
Department	\$ _____
College/school	\$ _____
Other (specify) _____	\$ _____

NOTE: Total amount of all sources including funding requested should equal anticipated expenses.

APPROVALS

Student: I request this funding to support my professional travel. I agree to follow the guidelines and procedures described above.

Signature of Student _____ Date _____

Student's Advisor: I have verified that the student is currently enrolled in the degree program identified on this application and will be presenting at the conference listed.

Advisor _____ Date _____

Student's Chair: I have read this request and recommend funding. The expenses listed are reasonable. Support of this request is important to the student's professional training. In sharing in the support of this request, the department will provide funding in the amount of:

\$ _____

Department Chairperson _____ Date _____