***Undergraduate and Graduate Travel Support***

***Application Form***

**[must be received no less than 30 days prior to any travel]**

**Applicant Name: KUID:**

**E-mail**:

**Academic Department and Program Area**: \_\_\_\_\_**C&T**  \_\_\_\_\_**EPSY** \_\_\_\_\_**ELPS** \_\_\_\_\_**HSES** \_\_\_\_\_**SPED**

**Check degree program: BS \_\_\_\_\_\_ MS/MSEd EdS PhD/EdD**

**Have you received funding before (Yes or No)? (used to determine funding source only) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Funds are requested for round-trip from Lawrence to:**

City State

**to attend (name of conference/meeting/break)**:

**This is a (check one) [ ] National meeting/conference [ ] Regional meeting/conference**

**[ ] Alternative Break [ ] International meeting/conference**

**Dates of conference/meeting: to**

**Exact dates of travel: to**

**Purpose of travel:**

**Presenting (primary presenter/first author)** (On a separate sheet, provide a complete citation for those

presentations in which you will be involved. List title[s] and co-author[s] / co-presenter[s].) (Funding

support maximum: $750 graduate/$400 undergraduate. See Guidelines document for details.)

**Co-presenting/secondary author** (Funding support maximum: $500 graduate/$250 undergraduate. See Guidelines

document for details.)

\_\_\_\_\_\_\_ A**ttending but not presenting or alternative-break** (Funding support maximum: $150 graduate/$100

undergraduate. See Guidelines document for details.)

**Attending with: (***name of faculty member***)**

**Please Print Name Print Advisor’s Name**

**Signature Date Advisor’s Signature**

**Approved** (Amount authorized: up to a maximum of $ **.00** )

**Not-Approved**

**Lisa Wolf-Wendel or Kelli Thomas, Assoc. Dean Date**

*You must submit to your department’s financial officer original and receipts and have submitted an out-of-state travel request in order to receive reimbursement for your travel. Consult with your department’s financial officer for details*