

**COLLEGE OF EDUCATION
GRADUATE STUDENT APPLICATION FOR TRAVEL SUPPORT**

NAME

PLEASE INDICATE GRADUATE PROGRAM ENROLLED IN:

MEd: ____ Graduate Program: _____

CONTACT PHONE NUMBER

PhD in Education: ____ Specialization: _____

PhD in Educational Psychology: ____

(Note: Please obtain graduate chair's approval/signature below)

E-MAIL

PURPOSE OF TRAVEL

MEETING

LOCATION

DATES (FROM / TO)

TITLE OF PRESENTATION

PLEASE ATTACH:

- A. Letter of application (indicating contribution in research/presentation)
- B. Abstract of paper or description of presentation
- C. Letter of invitation or acceptance of a contributed paper
- D. Copy of conference registration form
- E. Letter of support from faculty advisor or dissertation chair (indicating progress of student toward degree & role in research/presentation – see reverse side)

STUDENT SIGNATURE

DATE

RECOMMENDED / NOT RECOMMENDED

By Graduate Chair:

SIGNATURE / DATE

To be completed by Dean's office:

APPROVED / NOT APPROVED

By Faculty Committee Chair:

SIGNATURE / DATE

APPROVED / NOT APPROVED

By Dean:

SIGNATURE / DATE

Account Code: _____