

MSCS Graduate Student Travel Request Form

Today's Date: _____ Name: _____ UIN _____

Destination: _____ Departure date: _____ Return date: _____

Purpose of Travel/Conference Title: _____

Check One: Attendee only Speaking/Presenting, give title of your presentation: _____

Estimated Travel Expenses

Mode of Travel _____ Estimated cost _____

Registration fee (if applicable) _____ Estimated cost _____

Lodging _____ Estimated cost _____

Meal Per Diem (\$32.00 daily) _____ Estimated cost _____

Total Estimated Travel Expenses: \$ _____

Other Funding Sources

a. You must request funding from your thesis advisor before submitting this Travel Request.

>> If funding was received, indicate the amount granted. \$ _____

>> If funding was denied, explain why: _____

b. You must request funding from the Graduate College if you are a Presenter/Speaker.

>> If funding was received, indicate the amount granted. \$ _____

>> If funding was denied, explain why: _____

c. You must request funding from LAS before submitting this Travel request.

>> If funding was received, indicate the amount granted. \$ _____

>> If funding was denied, explain why: _____

d. You must request funding from the conference.

>> If funding was received, indicate the amount granted. \$ _____

e. Other Sources. _____ \$ _____

Total Funding Expected from Other Funding Sources (sum of items a. - e.): \$ _____

Difference between "Estimated Travel Expenses" and "Other Funding Sources": \$ _____

Advisor/Faculty Mentor Signature

DGS Approval

\$ _____
Amount Granted by MSCS

Note: The traveler pays all expenses. Reimbursement must be requested within 60 days of the traveler's return. To request reimbursement, submit this Travel Request form along with receipts to the Assistant to the Director of Business Affairs (MSCS).