

Doctoral Student Travel Program  
 Application for Support

Date _____	(please print)
Name _____	Student # _____
Major _____	Phone _____
Degree Program (Ph.D., Ed.D., etc.) _____	
Research Advisor: _____	

Purpose of Travel:

Conference in which participating: (Please attach confirmation of your paper in conference) :

Title of Paper/Poster Session:

Authors (in order) :

Place of Travel:

From \_\_\_\_\_ To \_\_\_\_\_

Dates of Travel

Leave \_\_\_\_\_ Return \_\_\_\_\_

Estimated Expenses	Total Cost
Registration Fee	\$ _____
Transportation	
Mode _____	\$ _____
Mileage _____ @ \$0.505/mile	\$ _____
Lodging (reasonable expense at nearby motel or sharing expected)	
Number of nights _____ @ \$ _____	\$ _____
Meals	
Number of days _____ @ \$ _____	\$ _____
Other - specify _____	\$ _____
Total Estimated Travel Expenses	\$ _____

Total amount of funding needed (maximum \$400):
\$

Identify funding sources:

Personal	\$ _____
Research Grant	\$ _____
Faculty Advisor Support	\$ _____
Department	\$ _____
College/University Request	\$ _____
Other	\$ _____
<b>Total</b>	<b>\$ _____</b>

Note: Total amount of all sources including amount requested from this Office should equal anticipated expenses.

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

### Approvals

I have read this request and recommend funding. The expenses listed are reasonable. Support of this request will be professionally beneficial both to the student and to West Virginia University. I have verified that the student is currently enrolled in the degree program identified. In sharing in the support of this request, the faculty advisor and/or department will provide funding in the amount shown above.

Faculty Advisor \_\_\_\_\_ Date \_\_\_\_\_

Department Chairperson \_\_\_\_\_ Date \_\_\_\_\_

College/University Amount Approved \_\_\_\_\_

\_\_\_\_\_  
College Approval \_\_\_\_\_ Date \_\_\_\_\_