

Travel Request Form

Directions: Please, print clearly, completing all sections. **Provide substantiation of all costs by attaching additional pages** (brochures, agendas, faculty email invitations, lodging and transportation estimates, etc)

Legal Name (as listed on your ID/DL):		DOB:	
Permanent Address (as listed on your ID/DL):	City	State	Zip
UROC Research Program & Faculty Mentor:		Student ID#:	
Name of Travel Event/Activity(Please include brochure/agenda):			
Type of Event/Activity:	Proposed Travel Date	es: t	o
Location of Travel Destination:			
Purpose of event attendance (Check corresponding box b	pelow.):		
Presenting research poster or paper (attach copy of presentation confirmation)			
Meeting with potential faculty mentor or campus re	epresentative		
Other (Please, provide explanation.):			
Provide title(s) of paper, poster, presentation, performance or meeting:			
Estimated Cost of Travel			
Airfare: \$ (Please attach a print out o	f your top 3 prefered flight	s w/ flight numbers	s)
Auto: \$ Estimated mileage:	Vehicle LP#:	\$	
Bus/Train/Shuttle: \$			
Registration & Abstract Submission Fees: \$			
Lodging: \$ per day X day(s) Meals: \$ Meals and incidental expenses			
Other: \$ Explanation for Other:		to \$62 per day for ac	tuai expenses.
Total estimated cost of travel: \$			
Matching Funds for Travel (is anyone else helping you pay for part of the travel/event costs)			
Sponsor Name:	Amount Sponsored: \$		
Description:			
Sponsor Name:	Amount Sponsored: \$		
Description:			
UROC Funding Approved:			
\$			
Amount Authorizing Name	Signature		Date
Comments:			