

Milligan Office of Undergraduate Research

Travel Grant Form

Instructions: If traveling as part of a group, fill out just one form for everyone in the group unless each individual is traveling and/or staying in separate accommodations. In that case, fill out separate forms. Faculty sponsors should include only travel expenses not already covered by their professional development travel fund.

Student(s) applying: _____

Faculty mentor(s) attending: _____

Conference Name: _____

Conference Location: _____

Conference Dates: _____

Reason for attending: _____ Oral Presentation _____ Poster _____ Other (explain)

Has your research been accepted to the conference already? _____ Yes _____ Not yet _____ Not applicable

If not, give anticipated date and likelihood of acceptance: _____

Describe here your rationale for attending this conference and what benefits you hope to gain from attending and presenting.

ANTICIPATED EXPENSES

Total student registration fees: _____ Total faculty registration fees not covered by professional travel fund: _____

Estimated round trip mileage (if driving): _____ Number of vehicles: _____ Milligan vehicles _____ Personal vehicles

Contact Grace Goehner first about reserving a Milligan vehicle, as this is the preferred mode of travel.

Total cost of driving: _____ (Milligan vehicles cost .25 cents per mile, personal vehicles cost .40 cents per mile)

Total expenses for travel if flying: _____ (attach supporting documentation showing final roundtrip ticket cost per person applying)

Estimated cost of parking or other travel-related expenses (e.g., cabs, shuttles, etc.): _____

Total Expenses for Hotel/lodging: _____ (attach supporting documentation)

Total expenses for meals not included in hotel or conference packages: _____ (assume \$5 breakfast, \$10 lunch, \$15 dinner)

List other expenses, such as cost of materials for printing posters: _____

List here any other agency or funding source that will be covering part of your travel costs:

GRAND TOTAL REQUESTED: _____

AMOUNT APPROVED: _____ Signed and dated.