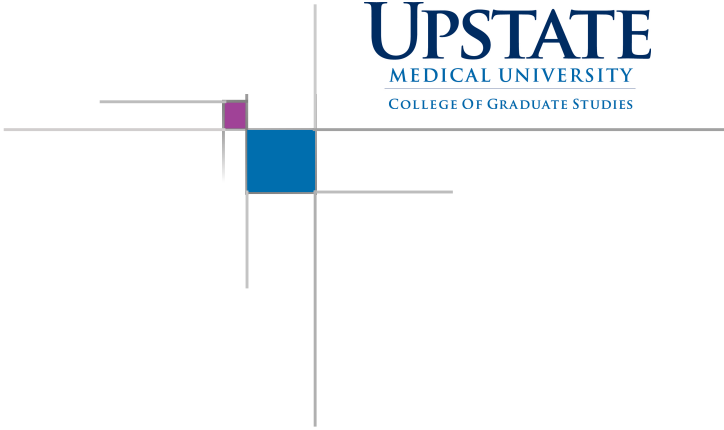


Office of Postdoctoral Affairs  
College of Graduate Studies



# REQUEST FOR TRAVEL FUNDING

*Please complete this form, including your Faculty Sponsor's Signature.  
This form should be submitted as soon as possible prior to travel (please attach materials describing the conference).*

Date: \_\_\_\_\_

From: \_\_\_\_\_

Department: \_\_\_\_\_

Name of Meeting/Conference: \_\_\_\_\_

Location of Meeting: \_\_\_\_\_

Date(s) of Meeting: \_\_\_\_\_

Are you Presenting? Yes  No

Registration . . . . . \$ \_\_\_\_\_

Travel . . . . . \$ \_\_\_\_\_

Lodging . . . . . \$ \_\_\_\_\_

Meals . . . . . \$ \_\_\_\_\_

\_\_\_\_\_  
Postdoc's Signature

\_\_\_\_\_  
Faculty Sponsor's Signature

\*\*\*\*\*

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AMOUNT: \$ \_\_\_\_\_

\_\_\_\_\_