

Application for Doctoral Conference Travel Support

First Name:

Middle Initial:

Last Name:

EMPLID:

Email address:

Mailing Address:

Ph.D. Program Name: (Select one)

Advisory Committee Chairperson:

Name of Conference:

Location of Conference:

Conference Dates: Start date:

End date:

Title of Paper or Presentation:

(Please attach a copy of the abstract or paper being presented)

Authors (list all authors):

Anticipated Travel Costs:

Transport:

Registration Fee:

Lodging:

Other:

Total Requested:
(limited to \$500)

The School of Graduate Studies encourages the use of Motor Pool Vehicles whenever possible for trips within driving distance. Travel by rail or plane should be coach, economy class or equivalent. Business class travel will not be reimbursed. All other expenses will be reimbursed in accordance with UND policies.

Justification of Travel (Briefly explain in 300 words or less, the benefits of attending this conference to you, your department/program, the University of North Dakota, and the State of North Dakota.)

___Approved ___Not Approved Amount _____ Date _____