

OFFICE OF GRADUATE STUDIES ACADEMIC TRAVEL SUPPORT APPLICATION FOR STUDENT PRESENTATION

Personal Information								
Name:	First	CIN: _						
Address		City	State	Zip				
Cal State LA Email:		Phon	e					
Degree Expected:	Major:		College:					
GPA:	Expected Date of Graduat	ion:	Semester	r/Year				
Faculty Advisor:		Emai	l:					
Conference Information								
Attending In-Person	Virtual	_						
Name of Conference:								
Location of Conference:								
Date of Conference:								
Presentation Title:								

Estimate of Expenses

Please include printed estimates from vendors you will likely use.

Item	Cost	Tax (if applicable)	Total	Office use only (up to 70%)
Registration/Membership/ Abstract Submission Fee				
Airfare				
Other (e.g. public transportation, car service)				
Lodging 2 Nights Maximum (\$275 max per night)				
Total				

NOTE: No more than two (2) authors of a co-authored paper will be eligible to receive funding and no more than seven (7) applications will be funded per conference. If you have already received the Travel Award for Professional Development this academic year, *you are not eligible to also receive this award.*

ATTACH THE FOLLOWING TO APPLICATION

Abstract

Provide an abstract (200 word limit) summarizing the focus of your research project.

Statement of Purpose

One-page statement from the applicant indicating the importance of the presentation to their educational objective as well as the need for financial support. Please list travel funds available from other sources.

Letter of Recommendation

One page letter of recommendation from faculty sponsor indicating the importance of the conference for the student.

Acceptance Verification

Print or copy verification that the presentation was accepted (official email, letter, schedule, etc.).

Estimates

Provide printed estimates for all expenses listed on page one. Estimates may be found online or by contacting vendors. If booking in advance, please note: receipts that combine hotel and airfare (bundles) are ineligible for reimbursement.

Program Description

Read, print and sign the program description from the graduate studies webpage (posted above the application).

By signing below, you and your faculty thesis/project advisor acknowledge that:

- 1. The applicant is PRESENTING at a professional/academic conference
- 2. The applicant does not have access to other funds through Cal State LA (State or UAS) to support travel for student presentation.
- 3. **Abstract, Statement of Purpose, Acceptance Verification and Estimates** have been reviewed and approved by the faculty advisor

Student:		
Print	Signature	Date
Faculty:		
Print	Signature	Date.

Please email your completed application to the Office of Graduate Studies via email at gradstudies@calstatela.edu