

2018 – 2019 STUDENT PRESENTATION TRAVEL PROGRAM  
Application Form

FACULTY INFORMATION

Name:

Department:

Phone Number:

TWU Email:

STUDENT INFORMATION

Name:

Department:

Phone Number:

TWU Email:

Classification:  Undergraduate  Post-Bac  MS / MA  PhD / EdD

STUDENT INFORMATION

Name:

Department:

Phone Number:

TWU Email:

Classification:  Undergraduate  Post-Bac  MS / MA  PhD / EdD

STUDENT INFORMATION (additional students)

If there are more than two students presenting, provide the name, department, phone number, email, and classification for each additional student.

## CONFERENCE INFORMATION

**Full Name of Conference (no abbreviations)**

**Destination**

**Dates of Travel** \_\_\_\_\_ to \_\_\_\_\_

**Status**

- Abstract Accepted (attach notification)
- Application Made but Pending
- Application Not Yet Submitted

**Significance**

## TITLE OF PRESENTATION

## ABSTRACT

Please cut and paste the abstract of the presentation to be made in the space provided below

## BUDGET REQUEST

Provide estimated budget for funds requested:

Airfare / Mileage
Car Rental / Other Transportation
Hotel
Conference Registration
Meals
Other ( )
<b>TOTAL (not to exceed \$750 per individual or \$1,500 total):</b>

If other funding sources are available, please list below. If no other sources of funding are available and the cost of the travel exceeds the amount provided by this program, it is understood that the traveler is responsible for the remaining costs.

TWU Department ( )

**Provide any other information regarding expenses below (if applicable):**

\_\_\_\_\_  
Signature of Student Presenter(s)

\_\_\_\_\_  
Signature of Student Presenter(s)

\_\_\_\_\_  
Signature of Student Presenter(s)

\_\_\_\_\_  
Signature of Student Presenter(s)

\_\_\_\_\_  
Signature of Faculty Mentor

\_\_\_\_\_  
Signature of Dept Chair/Director/Associate Dean

Submit via email with attachments to the Center for Student Research ([StudentResearch@twu.edu](mailto:StudentResearch@twu.edu)).