GPSA TRAVEL FUNDING APPLICATION

Updated Fall 2021

Please submit the following form to the Graduate School office in 317 Yoakley Hall

Or email following instructions on the website.

| Name: | E-Number: |
|--|---|
| Eligibility Checklist: | |
| • Submitted GPSA membership application | |
| • Paid membership dues (\$10) | |
| • Attended two or more GPSA events in the | 1 11 7 9 |
| • Agree to present research synopsis to GPS | |
| | e within a fiscal year (July 1 through June 30) |
| • Applying for travel funds at least 4 weeks | 1 |
| Applicant has sought funding from other s funding as a secondary form of funding | sources (e.g. departmental, grant, etc.) and are seeking GPSA |
| If you meet the above requirements, initial l | nere: |
| Initial to signify that you will give a present | ation to GPSA if awarded travel funds: |

Application Checklist:

- Travel funding application filled out completely
- Recommendation sheet from graduate coordinator or advisor
- Attached copy of abstract acceptance, if applicable
- Attached copy of receipts (airplane ticket, car rental, etc.) if applicable

Initial to signify that the information included in your application is correct:

Deadlines:

- For conferences held October-May: at least 4 weeks before date of departure
- For conferences held June-September: May 1st

CONTACT INFORMATION

| Name: | _ E#: | Date: | |
|---|------------------|-----------|--|
| College within ETSU: | Program o | of Study: | |
| Month/Year of Graduation: | Email: | | |
| CONFERI | ENCE INFORM | ATION | |
| Name of Event: | | | |
| City and State of Event: | | | |
| Dates of Event: | | | |
| Are you presenting at the conference? Yes \(\simega\) N | 4o 🗌 | | |
| Presentation Title: | | | |
| | | | |
| Departing on: | Returning on: | | |
| Is anyone else from your department attending th | e conference? Ye | es 🗆 No 🗀 | |

FUNDING INFORMATION

| Transportation funds requested from GPSA (cannot exceed \$700 if presenting, \$300 if not | |
|--|-------|
| presenting): | |
| Mode of transportation: Flying Driving Driving Other: | |
| Expected transportation costs: | |
| Expected lodging expenses: | |
| Expected meals and incidentals: | |
| Expected registration cost: | |
| Type and amount of other funding you've received for the event (e.g., department, grant): | |
| | |
| Please attach any receipts you have related to your travel expenses to this application. Also, if you have additional information that would be useful to the budget committee, please detail below. | e any |
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GPSA FACULTY RECOMMENDATION FORM

This form is to be completed by the graduate coordinator or advisor

| Name of Student: | |
|--|-----------------------------|
| Conference: | |
| Regarding the applicant attending the above event would you: | |
| o Recommend Strongly | |
| o Recommend | |
| o Recommend with Reservations | |
| o Do Not Recommend | |
| Are there sources of funding for students in your department to attend confer | rences? Yes No |
| If so, has the applicant pursued these sources of funding? | Yes No No |
| Did he/she receive any funding from these sources? | Yes 🗌 No 🔲 |
| Please use this space to write any additional comments which might assist G approval of GPSA transportation funds: | PSA in making a judgment of |
| | |
| | |
| | |
| | |
| | |
| Signature of Graduate Coordinator or Advisor: | Date: |