

**TTU COLLEGE OF EDUCATION GRADUATE STUDENT APPLICATION
TRAVEL ASSISTANCE FORM FOR THE SUPPORT OF SCHOLARLY ACTIVITIES**

(Application must be submitted to the College of Education 45 days prior to travel)

NAME: _____ **R#:** _____

ADDRESS: _____
STREET CITY STATE ZIP

TELEPHONE: _____ **TTU E-MAIL ADDRESS:** _____

MAJOR: _____ **DEGREE:** _____ **MAJOR PROFESSOR:** _____

IF YOU ARE A DOCTORAL STUDENT, HAVE YOU BEEN ADMITTED TO CANDIDACY (i.e. finished all coursework and passed qualifying exams)? YES NO

If "yes", which semester did you take your exams? _____

DOLLAR AMOUNT REQUESTED: _____ **Conference is:** Regional National International

ITEMIZE EXPENSES: Airfare: _____ Hotel: _____ Registration: _____ Other: _____

Supporting Documentation

- A. Copy of official letter of presentation/ poster acceptance attached
- B. Letter of support from College of Education major professor or other professor in a supervisory role

Note: The Graduate School travel application and guidelines can be found at, <https://www.depts.ttu.edu/gradschool/financial/travel.php>

NAME OF CONFERENCE: _____

DATE OF CONFERENCE: _____ **LOCATION:** _____
CITY STATE

AUTHOR(S)/ TITLE OF PRESENTATION: _____

STUDENT'S ROLE IN PRESENTATION AS STATED ON TRAVEL APPLICATION GUIDELINES FORM: _____

HOW WILL THIS SUPPORT BENEFIT THE COLLEGE OF EDUCATION? : _____

FOR OFFICE USE ONLY

DATE RECEIVED IN COLLEGE OF EDUCATION GRADUATE EDUCATION OFFICE: _____

SUPPORTING DOCUMENTATION PROVIDED:

_____ COPY OF OFFICIAL LETTER OF PRESENTATION/ PAPER ACCEPTANCE

_____ LETTER OF SUPPORT FROM COLLEGE OF EDUCATION MAJOR PROFESSOR OR OTHER PROFESSOR IN A SUPERVISORY ROLE

RECOMMENDATION:

_____ FUND (\$ _____)

_____ FUND, BUT AT REDUCED AMOUNT (\$ _____)

_____ DO NOT FUND – REASON: _____

SIGNATURE: ASSOCIATE DEAN, COLLEGE OF EDUCATION