

**Student Travel Program: Master's Application for Support
College of Human Resources & Education**

Name _____ WVU ID _____

Address _____

Phone _____ Email _____

Degree Program (M.A./M.S.) _____ Major/Dept. _____

Year in Program _____

Purpose of Travel:

Conference in which participating:

Title of Presentation:

_____ I have attached confirmation of the acceptance of this presentation.

Travel:

From _____ To _____

Dates:

Leave _____ Return _____

Estimated Expenses

Total Cost

Registration Fee: \$ _____

Transportation Mode: _____

Cost of Transportation (if driving, indicate mileage _____ and compute at 44.5/c/mile) \$ _____

Lodging: Number of nights _____ @ \$ _____ \$ _____

Meals: Number of days _____ @ \$ _____ \$ _____

Other (specify) _____ \$ _____

Total estimated travel expenses \$ _____

Total amount of funding requested (maximum: \$500) \$ _____

Identify additional funding sources:

Personal \$ _____

Department \$ _____

Other (specify) _____ \$ _____

Total additional funding sources \$ _____

Signature of Student _____

Date _____

Submit completed application to the appropriate department chair.

* * * * *

I have read this request and recommend funding. The expenses listed are reasonable. Support of this request will be professionally beneficial both to the student and to West Virginia University. The department will share support of this request by providing funding in the amount of \$ _____.

I have verified that the student is currently enrolled in the degree program identified on page one of the application.

Signature of Department Chair _____

Date _____

* * * * *

AMOUNT APPROVED \$ _____

College Approval

Date