Linguistics Graduate Travel Award Application

Answer all questions below and submit to Alec Graham (<u>alec.graham@ku.edu</u>), cc'ing Kelly Bellmyer (<u>kbellmyer@ku.edu</u>). Amount of funding is contingent on the number of applications.

KU has a number of policies that you need to follow regarding the use of travel funds; be sure to examine the details at this link carefully: <u>KU Policies</u>

Submit final report detailing how funds were used (within 1 month of spending completion) and the receipts.

Be sure to also save receipts for amounts you spend above your awarded amount, in case additional funds become available to provide further support.

*Please note that these funds are subject to taxes. The amount of taxes withheld or owed depends on individual's tax status.

APPLICANT INFORMATION

| KU ID: | |
|------------|--|
| Name: | |
| KU Email: | |
| Telephone: | |

CONFERENCE INFORMATION

| Conference Name: | |
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| Location/Venue: | |
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| Conference City: | |
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| Conference State (if U.S.) or Country: | |
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| Conference Date(s): | |
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| Conference Date(s): | |

| Presentation Title: | | | |
|-------------------------------------------------------|------|--------|-------|
| Name(s) of Co-Author(s): | | | |
| Presentation type (poster, oral presentation, other): | Oral | Poster | Other |
| If other, please explain. | | | |

TRAVEL INFORMATION

| Date of Departure: | |
|--------------------|--|
| Date of Return: | |

EXPENSES

Please list your travel expenses (see sample categories below) along with an estimated amount:

| Airfare: | |
|-------------------------------|--|
| Bus and other transportation: | |
| Lodging: | |
| Meals: | |
| Conference registration: | |
| Other: | |
| Other: | |
| TOTAL: | |

Did you apply for other travel funding for this trip? If you have applied or intend to apply for other travel funding, please list the source, the amount of support requested and the status of the application (e.g., intend to apply, applied and waiting for a response, awarded, etc.).

Yes No

| If yes, please name the source: | |
|---------------------------------|----|
| If awarded, amount received: | \$ |

| Advisor Endorsement (signature): | |
|----------------------------------|--|
| | |
| Date: | |