College of Veterinary Medicine Graduate Student Travel Application

The Office of the Associate Dean for Research provides funding for a limited number of travel awards to support graduate student travel fellowships to scientific meetings or other appropriate scholarly activity. Eligibility is limited to graduate students properly enrolled in a KSU College of Veterinary Medicine graduate program.

Application deadline:

November 15 – for travel that will occur between January 1 and June 30 of the next year. April 30 – for travel that will occur between July 1 and December 31 of the current year.

Applications must be completed, signed, and submitted to Barb Turner, 302 Coles Hall. Applications may be sent electronically to: bturner3@vet.k-state.edu

Incomplete or illegible applications will not be considered.

Name:								
Email Addres	ss:							
Department	:							
Office Addre	ess:							
Telephone:								
Degree Prog	ram: (O MS	○ PhD	OMPH (zoonosis/	infectious disease)			
Major Profes	ssor:							
Year in gradu	uate sch	ool:						
Anticipated {	graduati	on date:						
presentation Event/Meeti	ng:		urriculum v	ritae listing publication	ns (published and su	bmitted only)	and all	
Event/Meeti	ing web	address:						
Event Location	on:							
Dates of Eve	nt:							
Dates of Trav	vel:							
Have you submitted or will you be submitting an abstract? O YES O NO (If yes, please attach a copy of your abstract.)								
Purpose: des	scribe ty	pe of pres	sentation o	r activity to be perfor	med (i.e., poster pre	sentation, ora	l presentation)	
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Are there others from your group/lab who will also be attending the event/meeting? Please list:
Are you receiving other funds to support this trip? Please describe the source and amount of funding: (Are travel grant opportunities available from the meeting/event? If so, do you plan to apply? Will any of your travel costs be covered by your advisor, department or any other scholarships?
Brief Budget of Anticipated Expenses: Provide an estimated budget for your trip, including airfare, lodging, meals, registration, and other anticipated costs (indicate source of your budget information). Explain what you have done to minimize the cost (sharing a room, staying over Saturday night to obtain reduced airfare, etc.)
Mode of transportation: Airline Private vehicle State vehicle Rental car Shuttle
Transportation Cost\$
Lodging Expenses\$
Meeting Registration\$
Meals\$
Miscellaneous Expenses\$
Total Request\$
Will any meals be covered as part of your registration? OYES NO
Please attach a copy of the meeting itinerary/registration confirmation or other documents verifying the cost of your trip.

t the Kansas State University College of Veterinary Medicine.		
y signing below, I certify that the above information is true and	d correct to the best of my	knowledge.
	Data	
pplicant	Date	
ly signing below, I verify that this student will participate in the fully endorse this request.	event/meeting as describ	ed above and
Major Professor	Date	
e sure to double-check Have you provided all of the following		
Your CVAnticipated Budget / Meeting Itinerary Documents		
 sure to double-check Have you provided all of the following Complete Application Your CV 		