



MISSISSIPPI STATE UNIVERSITY™
COLLEGE OF ARTS & SCIENCES

CAS Graduate Student Travel Support Application Form

First Name:

Last Name:

Net ID:

Department:

Degree:

Concentration (if applicable):

Name of Conference/Meeting:

Conference/Meeting Dates:

Location - City, State, and Country (if international conference/meeting):

Conference/Meeting Website (if available):

Type of Presentation:

Oral (Preferred):

Poster:

Title of Presentation:

Authors:

Abstract (500 words MAX):

Justification of why funding assistance is needed (500 words MAX):

Itemized Budget

Airfare:

Hotel:

Meals:

Grnd. Trnspt:

Other:

Total Request:

Committed and Requested Funds

Funding commitment by department:

Funding requested from Arts & Sciences:

TAGGS and Other Sources of Funding:

Approvals

By signing below you indicate your support for the student travel request and you agree to the stated funds committed by your unit.

Major Professor Signature:

Major Professor Email:

Graduate Coordinator Signature:

Graduate Coordinator Email:

Department Head Signature:

Department Head Email: