

## Request for event/conference and travel funds reimbursement

Date submitted: \_\_\_\_\_

Student Name: \_\_\_\_\_

Event/Conference Title:\_\_\_\_\_\_ Event/Conference Date(s) \_\_\_\_\_

Location:\_\_\_\_\_\*Submit copy of event/conference flyer, agenda or website (required by Foundation) International events must include additional forms, insurance, and prior approval.

All waivers and liability forms must be on file prior to departure.

Presenting: \_\_\_\_ Yes \_\_\_\_\_No \* Priority for funding is given to students presenting research and if presenting attach abstract. <u>LSAMP</u> <u>NSF Grant Number must be acknowledged</u> i.e. CSU-LSAMP is funded through the National Science Foundation (NSF) under grant #HRD-1826490, Chancellor's Office of the California State University, and Fresno State.

If presenting, obtain Faculty Mentor Approval:

Faculty Signature	-	Facu	Ity Name (print)	
Conference/Travel I	Budaet			

Line Item	Amount funded by event/conference scholarship (Please note if scholarship is not available or if applied and funding status is unknown)	Amount request from LSAMP	Amount funded by other source i.e. undergrad studies, ASI, et.	Total for each line item
Travel (flight, train, shuttle, etc.) attach copy of quote or reservation				
Hotel: attach copy of quote or reservation				
Registration: attach copy of quote or invoice				
Food				
Poster Printing				
Other (explain)				
Total by funding source				

A reimbursement questionnaire must be completed which includes a copy of the abstract (if presented), **citation**, **electronic pictures** of the student(s) attending the event and feedback as to how you benefited from the event. Original receipts must be submitted.

LSAMP Office Use:

Fully funded \_\_\_\_\_\_ Partial funding \_\_\_\_\_\_ No funding \_\_\_\_\_\_ Reason \_\_\_\_\_\_

Date \_\_\_\_\_ LSAMP Coordinator/Director Signature \_\_\_\_\_

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