



SCHOOL OF
GRADUATE STUDIES

Graduate Student Request for Travel Assistance Form

Adobe Reader, minimum version 8, is required to complete this form. Download the latest version at <http://get.adobe.com/reader>. (1) Save the form by clicking on the diskette icon on the upper left side of the screen; (2) Ensure that you are saving the file in PDF format; (3) Specify where you would like to save the file, e.g. Desktop; (4) Review the [How to create and insert a digital signature](#) webpage for step by step instructions; (5) Fill in the required data and save the file; (6) Send the completed form by email to: sgs@mun.ca.

Student Information				
MUN #:	Last Name:	First Name:	Initial:	
Academic Unit:		Degree:		
Email:		Tel. no.:		
Conference Information				
Name of Conference:		Dates:		
Place:				
Have you been accepted to present a paper/poster?			Yes No	
<i>If yes, please attach title, abstract, and verification of acceptance.</i>				
Foreign Travel				
If traveling abroad, I have read the Memorial safety and security procedures (see Graduate Student Travel Policy for details).			Yes No	
Estimated Travel Expenses				
Transportation \$	Registrations \$	Meals \$		
Taxis \$	Lodging \$	Other \$		
	Total Expenses \$			
<i>Receipts are required for all expenses with the exception of meals. Travel claims are to be submitted within 10 days of conference end date.</i>				
Signatures				
Student Signature		Date	Medicine Vice Dean (RGS) Signature (Absence from Campus)	
Funding				
Date	Prior Funding*	Amount	FOAPAL	Approval of Funds
	Yes No			Supervisor
	Yes No			Paul Tucker, COO (MED)
	Yes No			Amy Carroll, RGS (MED)
	Yes No			Dean of Graduate Studies
	Yes No			Graduate Students' Union
	Yes No			TAUMUN

*If yes, please indicate the number of times.

Administrators please note: The signature of the Department Head is required before the travel is undertaken to indicate approval of absence from campus. In addition, the appropriate signatures are required for all funding sources to certify that funds are available.

Original: with Travel Advance Form or Travel Claim Copy: Department Copy: Student

Memorial University protects your privacy and maintains the confidentiality of personal information. The information requested in this form is collected under the general authority of the Memorial University Act ([RSNL1990CHAPTERM-7](#)). It is required for administrative purposes of the School of Graduate Studies. If you have any questions about the collection and use of this information please contact the School of Graduate Studies at 709.864.2445 or sgs@mun.ca.