

Syracuse University Department of Biology
The Robert and Susan Hallenbeck Graduate Student Travel Award

REQUEST FORM

PART I: STUDENT must complete this section:

Name: _____ SUID #: _____

Degree Sought: _____ Advisor: _____ # of Years in Residence: _____

E-mail: _____ Campus Phone #: _____

Conference Name and Location: _____

Conference Date(s): _____

Presentation Type (poster, talk, invited): _____

Presentation Title: _____

Estimated total expenses: (Travel: \$ _____ Lodging: \$ _____ Food: \$ _____ Registration: \$ _____) = Total: \$ _____

Estimate other sources of support (amount and source if known): \$ _____

* Check with the conference you are attending to see if funds are available.

* Apply for travel grant from GSO: <http://gradorg.syr.edu/travel-grant>



I agree to write a personal thank-you letter to the travel fund donors—Robert and Susan Hallenbeck—within 4 weeks after my return date from the conference.

I hereby certify that the information I have provided on this form is accurate to the best of my knowledge.

Student Signature

Date

Please note: If approved, receipts must be provided after traveling and within 60 days of the conference.

PART II: ADVISOR must complete this section and initial:

Advisor Financial Support: \$ _____ Source of Funding: _____ Initials: _____

Student: After this section is completed by your advisor, submit form to the Graduate Academic Support Coordinator (biograd@syr.edu) with proof from meeting organizers that your presentation has been accepted.

PART III: DEPARTMENT APPROVAL

Amount Awarded : \$ _____
(maximum \$500)

Approved by: _____

Graduate Academic Support Coordinator

Date