

R	outing
Academic A	
Director of the Doctoral Pr	ogram
☐Graduate Student Services Ma	anager
SOJC Business	Office

SOJC Graduate Student Conference Travel Funding Request

Funding requests must be approved by your advisor and the Director of the Doctoral Program

Please be aware that these funds will be paid to your student account as scholarships but should NOT affect your financial aid. A portion of the amount awarded to students who are not U.S. citizens may be withheld by Financial Aid in order to comply with U.S. tax law.

Full name:	Tod	Today's Date:				
JO ID		Email		@uo	regon.edu	
Event			Location			
Date of Business Trip		Personal travel inclu	ded? (if yes, provide dates and in	clude compar	ison quotes):	
Business Purpose: Explain how acronyms). On how to write a			Please state the <u>full name</u> of the organized of the orga	anization spons	oring the event	
Role in the event:	Presenter/Panelist	Attendee	Other (explain):			
'ype of Presentation:		Title of Pre	sentation			
revious funding received from	m SOJC or other sources	(amount and purpose):				
		ill only be disbursed up to	hat you might incur. YOU ARE REATH the dollar amount approved by the			
Registration	Estimate	✓	Funding Source (select all that apply)	Index	Amount	
Airfare			Graduate Travel Budget	FGGRGF		
Fuel			Other:			
Lodging			Other:			
Per Diem			Other.			
Other: taxi, shuttle, parking, baggage	e, etc.					
	l or similar original receipt fr	om the travel destination within	t policy. I understand that all charges I int n <u>10 days</u> after the date of the travel. I als ations will be reversed.			
equestor Signature		Printed Nan	Printed Name		Date	
ademic Advisor Signature		Printed Nan	Printed Name		Date	
OJC Funding: Approved f	or Total Amount	Denied Reason:				