

**DEPARTMENT OF POLITICAL SCIENCE**  
**Application For Travel Reimbursement**

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NAME:

SOCIAL SECURITY #:

ADDRESS:

CONFERENCE:

LOCATION:

NATURE OF PARTICIPATION:

DATE:

TITLE OF PAPER:

ADDITIONAL RESOURCES:

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**ELIGIBILITY FOR CONFERENCE/POSTER FUNDS:**

Must be presenting a paper or poster at an academic conference; paper or poster must be approved by your faculty advisor or Department Chair; and must have applied for alternative funding and be able to provide documentation.

**REQUIRED DOCUMENTS FOR REIMBURSEMENT:**

Original receipts, proof of purchase (e.g., credit card statement, cancelled check), and copy of program page showing name and title of paper.

**I HEREBY ACKNOWLEDGE THAT FAILURE TO PROVIDE REQUIRED DOCUMENTATIONS MAY RESULT IN DENIAL OF THIS REQUEST.**

SIGNED:

DATE:

COMMENTS:

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**DEPARTMENTAL USE ONLY**

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APPROVED

SIGNED: \_\_\_\_\_

DENIED

DATE: \_\_\_\_\_

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REASON:

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