



1. **Priority Criteria for Distribution of Travel Funds:**

- The student must be sponsored by his/her major advisor.
- The purpose of the travel must be to advance professional development and/or presentation at a regional or national conference.
- Funding priority is given to students who are **enrolled full time** in their graduate program (12 credit hours/semester for Biomedical Sciences, PhD and 9 credit hours/semester for all other graduate programs).
- The application for travel must be reviewed and approved by the Office of the Dean of The Graduate School.
- Funding for travel will be awarded based on availability of funds.

2. **A limit on the amount given to each student for travel has been established in the following areas:**

- Doctoral graduate students may request funding for multiple events, but will not be awarded more than \$1,000 support by The Graduate School during each fiscal year.
- Non-Doctoral TGS graduate students may request funds for one event and may receive no more than \$500 support by The Graduate School each fiscal year.

3. **Travel Funds other than those distributed by The Graduate School:**

- Any costs/expenses that exceed the approved allowance from The Graduate School should be requested from the student's home department.
- Those students with financial support such as MARC, NIH, foreign, or other fellowships or traineeships should request support from those sources **before** applying to the graduate student travel fund.

The Graduate School may fund only part of the total amount requested by the student. Students should not make travel arrangements until their travel application is approved.



PROCEDURES FOR TGS STUDENT TRAVEL FUNDS REQUESTS

1. The student requests travel funding in advance of the meeting, using the Request for **Request for Travel Funds Form**. The request must be signed by the student's major advisor.
2. The Graduate School office will review request for travel funds. The Director of Business Operations for The Graduate School will then notify the student and advisor, in writing, of travel award to be funded by The Graduate School.
3. The **AU Travel Authorization Form** is prepared by the student's program department showing any financial support from the department, and then sent to the Director of Business Operations in the Graduate School for account number and signature.
4. Upon return, the **Travel Expense Statement** will be prepared by the by the student's program department and then sent to the Director of Business Operations in the Graduate School for signature.

See next page for Travel Funds Request Form



General Information													
Date of Request: _____													
Student's Name: _____	Student's Jag ID: _____												
Student's Graduate Program: _____	Degree: _____												
Year Entered Graduate Program: _____													
Anticipated Graduation Date: _____(semester/year)													
Emergency Contact Information: _____													
Travel Information													
Meeting Name: _____	Location of Meeting: _____												
Dates of Meeting: _____	Departure _____ Return _____												
Estimated Travel Expenditures													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #d9e1f2;"> <th>Description</th> <th>Estimated Cost</th> </tr> </thead> <tbody> <tr> <td>Registration</td> <td></td> </tr> <tr> <td>Lodging</td> <td></td> </tr> <tr> <td>Airline (if applicable)</td> <td></td> </tr> <tr> <td>Mileage (\$0.585/mile)</td> <td></td> </tr> <tr> <td>Misc. (please list)</td> <td></td> </tr> </tbody> </table>		Description	Estimated Cost	Registration		Lodging		Airline (if applicable)		Mileage (\$0.585/mile)		Misc. (please list)	
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Registration													
Lodging													
Airline (if applicable)													
Mileage (\$0.585/mile)													
Misc. (please list)													
Estimated Total: \$ _____													

STUDENT: Please provide a picture and brief description of your experience of presenting your work at this meeting and submit to Emily Crider in The Graduate School upon your return.

Name	Signature	Date
_____	_____	_____
Student		
_____	_____	_____
Major Advisor		

Please send completed form to Emily Crider, Director of Graduate School Business Operations:
The Graduate School (CJ 2201) or ECRIDER@augusta.edu

Graduate School Use Only:		
Total Amount Requested = \$ _____	Total Amount Approved = \$ _____	
_____	_____	_____
<i>Graduate School Designee</i>	<i>Signature</i>	<i>Date</i>