



Undergraduate Research Conference Travel Request

Student Name: _____ PSU ID: _____

College: _____ Major: _____

Campus Address: _____ Email: _____

Faculty Mentor: _____

Name of Conference: _____

Location: _____ Dates: _____

Title of Presentation: _____

Type of Presentation (check one): _____ Oral; _____ Poster; _____ Panel; _____ Other

If other, please specify: _____

Itemized anticipated expenses (transportation, meals, lodging, registration, etc.):

Statement of support from mentor/department (required; attach additional pages if needed):

Approvals:

Amount: _____ Department Signature: _____

¹Amount: _____ College Signature: _____

Amount: _____ Schreyer Honors College: _____
(if applicable)

²Amount: _____ Undergraduate Education: _____

After other approvals are in place, send to Assistant Dean Mary Beth Crowe, 417 Old Main, University Park.

¹For student presenters, if funds available, limited to one-third of total cost up to \$300 per student. For non-presenters, if funds available, limited to one-third of total cost up to \$150 per student.

²For student presenters, if funds available, limited to one-third of total cost up to \$300 per student.