**Office of Academic Affairs**

**Doctoral Student Travel Program - Guidelines**

The Office of Academic Affairs will assist in the support of graduate student travel expenses to professional society meetings. You must apply through your college or school for the support.

**Eligibility**

* Any doctoral graduate student attending a professional meeting to present a paper, serve on a panel, or participate in some other active, significant way is eligible to apply for travel support.
* Priority will be given to requests from students in terminal master’s degree programs.

**Funding Restrictions:**

* The maximum award for any student is $200.
* Funding will be provided in the form of a reimbursement only for actual costs incurred for meals, transportation, registration fees, and lodging not to exceed the amount of the award. This program will reimburse no other expenses.
* Each student may receive support from this program only one time during the fiscal year (July 1 – June 30).
* Requests to fund travel by several students to attend the same meeting or conference should be submitted together, and students are expected to share expenses and the award.
* The number and amount of awards are limited by the resources available to the College at the time of the request. **A limited amount of funding will be available Fall and Spring semesters and will be provided on a first come-first serve basis until it is depleted.**
* No changes to the itinerary are permitted. If a student receives an award and later decides to participate in a different conference, he/she forfeits the award and is ineligible for funding for the remainder of the fiscal year. The funds will be provided to another eligible student.
* Travelers must adhere to the University’s travel guidelines, including the use of National Travel for travel arrangements, and compliance with the Higher Education Travel Rule.

**Request Procedures**

* Requests should be made by completing the attached application form and obtaining the necessary approvals.
* Group requests must be submitted together. As stated earlier, if presenting a paper jointly, the students will share expenses and the award. If presenting different papers, the students will share expenses and the award. Groups of three or more will be provided with no more than $800.
* All requests must comply with the Higher Education Travel Rule.

**Award Procedures**

* The department chair and college dean will review requests.
* Awards will be made at the college level.
* Students will be notified in a manner determined by the college.

**Travel Procedures**

* It is strongly recommended that you discuss your travel plans with your department’s travel representative or the college Expert Business Operations (EBO). Failure to adhere to the Travel Rule could result in a delay in reimbursement or rejection of your expenses.
* **You are required to obtain prior approval for your travel.** Contact you department or college EBO for details.
* If your expenses total less than the award, the remaining funds will be used to support other student awards.

Funds will be transferred to the college for this support.

**Reimbursement Procedures**

* Within three business days of your return, you must submit applicable receipts and complete an expense account settlement form in accordance with the Higher Education Travel Rule for reimbursement.
* Your department will forward the expense account settlement to Business and Procurement Services for processing.
* Your reimbursement check will be mailed to your local address.

**DEADLINE FOR SUBMISSION:** All travel requests MUST be submitted PRIOR to departure. Requests must be received on or before June 1 to be considered for the current fiscal year.

**Office of Academic Affairs**

**Doctoral Student Travel Program - Application**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Date |  | | | | | | |
| Name |  | | | | | Student ID |  |
| Email |  | | | | | Phone Number |  |
| Major |  | | | | | | |
| Degree Program (PhD., Ed.D., etc.) | | | | |  | | |
| Purpose of Travel | |  | | | | | |
| Conference Title | |  | | | | | |
| Title of Paper/Poster Session | | | |  | | | |
| Date(s) and Destination: | | |  | | | | |

|  |  |  |
| --- | --- | --- |
| **Estimated Expenses** | **Departmental or**  **Personal Contribution** | **Total Cost** |
| Registration Fee: |  |  |
| Mode of Transportation  Airline:  Personal Car @ $.535/mile:  Other: |  |  |
| Lodging:  Number of nights \_\_\_\_\_ @ \_\_\_\_\_ |  |  |
| Meals:  Number of days \_\_\_\_\_ @ \_\_\_\_\_ |  |  |
| Parking/Taxi/Other: |  |  |

|  |  |
| --- | --- |
| **Total amount of funding requested (maximum $200): $** |  |

Have you applied for support from the Academic Affairs Doctoral Student Travel program for the current academic year?

\_\_\_\_\_YES \_\_\_\_\_NO Amount received: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_

I certify that, to the best of my knowledge and belief, all of the information on this form is correct and adheres to the program guidelines.

*Students: Please send this completed application to your department chair via email.*

**Departmental Approvals**

I have read this request and recommend funding. The expenses listed are reasonable. Support of this request will be professionally beneficial both to the student and to West Virginia University. I verify that no other research grant support is available to support this travel. In sharing in the support of this request, the college and/or department will provide funding in the amount of

$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Department Chairperson \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_

I have verified that the student is currently enrolled in the degree program identified on page on the application.

*Chairs: Please use this application to complete your graduate travel spreadsheet and submit the spreadsheet to the Dean’s Office by the first Monday of each month.*

**Chairperson Submit Electronically with Approval to:**

[**srodehea@mail.wvu.edu**](mailto:srodehea@mail.wvu.edu)