

For office use only	
CCAP \$ _____	Date application received ____/____/____
Total previous awards \$ _____	Presenting Yes ___ No ___
Amount approved \$ _____	GSA initial/date 1 _____ 2 _____
Rejected (initial/date) _____	Reason _____

**Graduate Students' Association
CONFERENCE TRAVEL APPLICATION**

***** Application Due 10 BUSINESS DAYS BEFORE the start of travel *****

APPLICANT

Name _____ Program _____
 Address _____ City _____ Zip _____
 Phone (____) _____ Soc.Sec.# _____
 Email _____
 Campus Box _____ Campus Phone _____

I have paid GSA fees for 1__ 2__ 3__ 4__ 5__ 6__ >6__ years.
 I'm a doctoral student and have advanced to candidacy. Yes*__ No__
 *If you answered yes, the Graduate Division signature on page two, number two, is required.

CONFERENCE

Conference Name _____
 Conference location (city, state, country) _____
 Dates of Travel _____ Conference Dates _____

(Application is due 10 business days before the start of travel. Late applications will not be considered/accepted.)

How will you participate in this conference?

__ Talk Title: _____
 __ Poster Title: _____
 __ Attending, but not presenting
 __ Other Explain: _____

FUNDING SOURCES

Source _____ Amount \$ _____
 Source _____ Amount \$ _____
 Previous GSA Award

Conference Name	Location	Date	Amount Received
_____	_____	_____	\$ _____

CONFERENCE EXPENSES (estimated) Amount Requested from GSA \$ _____

Registration \$ _____
 Transportation \$ _____
 Lodging \$ _____ ****Meals and gasoline are not reimbursable****
 Total Expenses \$ _____
 I am sharing travel expenses. Yes*__ No__

* To receive approval for shared expenses call the Office of Student Life, 476-4318, **10 BUSINESS days BEFORE the start of travel.**

Application: GSA Conference Travel Funds (page 2)

GSA Conference Travel Funds are intended ONLY as a supplemental resource. Since the funds are limited, you must FIRST seek support through your advisor, and your department. Doctoral students who have advanced to candidacy must also check with the Graduate Division for funding.

All students must obtain a department head, group leader or advisor signature, and if you are a doctoral student who has advanced to candidacy, you must also obtain a signature from the Graduate Division whether or not they have funds for you.

1. I (HAVE ___ DO NOT HAVE ___) funds available for this student.

_____		\$ _____
Dept. Head / Group Leader / Advisor	Date	Amount

2. I (HAVE ___ DO NOT HAVE ___) funds available for this student.

_____		\$ _____
Graduate Division Signature	Date	Amount

3. I HAVE ___ read and will comply with the GSA policy for awarding Conference Travel Funds, I HAVE ___ submitted my application ten business days before the start of travel, and I WILL ___ submit my receipts within 10 business days of the last day of travel.

_____	_____
Student Signature	Date

Mail, fax or deliver application to: Graduate Students' Association
108 Millberry Union West
500 Parnassus Avenue, Box 0376
University of California, San Francisco
San Francisco, CA 94143-0376
415-476-2233
415-476-7295 Fax