SCHOLARLY TRAVEL APPROVAL FORM
CCAS Undergraduate Studies Office
801 22nd St, NW
Phillips Hall 107
Washington, DC 20052
Phone: (202) 994-6210 Fax: (202) 994-6213

Name: ___________________________ GWid: ___________________________
   Last Name                      First Name                  M.I.

Date of Request: ___________________________ GW E-mail: ________________@gwmail.gwu.edu

Daytime Number: ___________________________ Student’s Signature: ___________________________

Required Conditions for Reimbursement:

☐ Undergraduate student’s 1st major is in CCAS
☐ Student is listed as the first author/presenter for the poster or paper
☐ Student’s UG major department is willing to contribute at least $150 towards conference expenses
☐ Evidence of accepted poster or paper is attached. For example, an accepted abstract or your name in a conference program

Purpose of Travel, including conference name and purpose of attendance. Responses may include presenting a paper/poster:

Travel Dates: ___________________________ *Destination: ___________________________
*If traveling internationally, you must register for the University’s International Travel Insurance and Assistance

FOR CHAIR OR UG FACULTY DIRECTOR:

Requested Departmental Contribution: $150 ☐ Approved as Requested  ☐ Approved as $ ___________

Email address(es) to notify in addition to traveler: __________________________________________

Chair or UG Faculty Director’s Signature: _________________________________________________

ALL TRAVEL AND DEAN’S OFFICE COMMITMENTS MUST BE APPROVED PRIOR TO THE DATE OF DEPARTURE. RETROACTIVE REQUESTS WILL NOT BE PROCESSED.