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: Gw__________
   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.