

Math Ed Graduate Student Travel Worksheet

Both Pages **REQUIRED**

Travel Fund Request and Worksheet

Build your travel profile at www.travel.msu.edu. ALL travelers must fill out a Pre-Trip Authorization (PTA) located on the front page of the Travel at State website, all PTA's must be completed and approved prior to departure and any travel related reservations/payments made.

Requests for the year should be submitted at the beginning of the fall semester, or as soon as possible, and allowing at least one month before your anticipated travel. Up to \$1,000 may be available in travel reimbursement to a conference **at which you present your own research**. Program travel funds may be limited to students in years one through five of the program, and available to students beyond year five as funds permit.

These travel funds can be used for conferences from August 16, 2020 through August 15, 2021.

Instructions: Please open using Adobe Reader, **NOT Preview**.

Student Name: _____

Title of Conference: _____

Location of Conference: _____

Date/s of Conference: _____

Title of Your Accepted Presentation: _____

Advisor Signature

Date

Return to Freda Cruél when filled out completely.

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Please submit this worksheet when you submit your PRIME travel fund request, along with page one above.

Student Name _____ Cell Phone _____

PID _____ Email _____

Conference Name AND Location (City, State): _____

Conference Date(s): start: _____ end: _____

Travel Date(s): start: _____ end: _____

Amount requested from Program: \$ _____

Are you currently working on a project at MSU? (yes or no) _____

If you answered YES to the question above, amount requested from project you are currently working on to help defray costs: \$ _____

Emergency Contact: _____
Name Phone Email

Please estimate the cost of your travel/conference:

Conference Registration, if applicable:
Was this paid for on Freda's MSU MasterCard? Y N \$ _____

Travel to and from destination: Airfare, mileage if driving
(mileage reimbursement rate for 2020 is .57 cents per mile) \$ _____

Note: If flying, it may be possible to direct-bill your flight to Program – see Freda for details.

Hotel: _____ #nights at \$ _____ per night \$ _____

(Submit paid receipt with \$0 balance and last 4 digits of credit card on receipt.)

If sharing a room with another graduate student attending same conference, please list name(s) below:

Staying with: _____