



**NC State College of Veterinary Medicine
Graduate Student Association
Travel Fund Application**

Please note that you must also complete a **Travel Fund Voucher** and keep the **original receipts** to back up your funding request. You must also submit your **abstract** as it appears in the conference bulletin or a signed letter from the conference committee.

General Information

Applicant Name: _____

Degree: M.S. Ph.D. (circle)

Expected Graduation Date: _____

School Address: _____

Home Address: _____

Phone: _____ (office) _____ (home)

Have you received previous travel funding from the CVM-GSA this year? If so

 Date received: _____

 Amount received: _____

 Degree sought at time: M.S. Ph.D. (circle)

Conference Information

Name of Conference: _____

Title or Description of Work: _____

City and State of Conference: _____

Meeting Date: _____

Date of Presentation: _____

Return completed form to:

 Susan Irvin, CVM GSA President
 NC State College of Veterinary Medicine Mailroom
 4700 Hillsborough Street
 Raleigh, NC 27606