

Student Travel Fund | Funding Checklist

Overview:

The members of your Purdue University Fort Wayne Student Travel Fund Committee are pleased that you have decided to take the initiative to take a trip for the purpose of academic enrichment and/or professional development. Your Student Travel Fund Committee wants you to succeed, which is why we have implemented a Funding Checklist to help our student organizations and academic groups to get started! Student organizations and academic groups are required to deplete all other outside funding prior to presenting to the Student Travel Fund Committee per the Student Travel Fund guidelines. **Forms may be submitted either in person to the Office of Student Life (Walb 210) or via email to studenttravel@pfw.edu.** The sooner this form is submitted, the sooner your request can be added to a Student Travel Fund Committee meeting agenda. Failure to complete this form will result in your trip being ineligible to proceed with the Student Travel Fund Committee funding request process.

PLEASE PRINT CLEARLY

Trip Number: _____

Student Requestor Printed Name: _____

Student Requestor PFW Email: _____

Trip Name (Conference/Workshop/Training): _____

Trip Destination (City, State, Country): _____

Travel Dates: _____ – _____

Affiliated Student Organization/ Academic Department: _____

Questions?

Email studenttravel@pfw.edu
or Visit Walb 210

Student Travel Fund Committee

Sponsored By:



Attendees:

Please obtain the signature of each group member who plans to attend the trip. **By signing this form, each student acknowledges that the Student Travel Fund Committee does not guarantee funding. Students also acknowledge the individual funding limits of \$1,500 per academic year and a lifetime maximum of \$9,000 throughout their academic career. Students acknowledge group funding limits of \$6,000 per academic year.** If a student who received funding is no longer able to attend the trip, substitutions are **not** permitted. Any funding allocated for that student is **not** eligible to be transferred to another individual and may be returned to the Student Travel Fund Committee.

***Student Travel
Use Only
Individual
Funding Avail.***

**Print Student Attendee
First & Last Name**

**Student Attendee
Signature**

**Date
Signed**

**Individual
Funding Avail.**

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Attendees:

Please obtain the signature of each group member who plans to attend the trip. **By signing this form, each student acknowledges that the Student Travel Fund Committee does not guarantee funding. Students also acknowledge the individual funding limits of \$1,500 per academic year and a lifetime maximum of \$9,000 throughout their academic career. Students acknowledge group funding limits of \$6,000 per academic year.** If a student who received funding is no longer able to attend the trip, substitutions are **not** permitted. Any funding allocated for that student is **not** eligible to be transferred to another individual and may be returned to the Student Travel Fund Committee.

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	Print Student Attendee First & Last Name	Student Attendee Signature	Date Signed	
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Please complete the sections below to demonstrate that your group has *explored* and *attempted* to utilize all other available funding sources prior to presenting your request to the Student Travel Fund Committee. Where signatures are requested, **written consent provided via email is also acceptable in lieu of a physical signature**. If submitting email consent, please attach the full email conversation showing the approval to this document and/or email to studenttravel@pfw.edu.

Student Organization Financial Contribution: \$_____

Select the applicable expense categories for which funding will be used and provide the amount allocated to each selected category.

- ☐ Airfare: \$_____
- ☐ Ground Transportation: \$_____
- ☐ Lodging: \$_____
- ☐ Conference Registration: \$_____
- ☐ Other: _____ \$_____

Student Org. Name: _____

Student Org. Email: _____

By signing below, I (President/Treasurer) approve the amount listed above to be withdrawn from the student organization account for the purpose of this trip, or confirm that these funds have already been allocated toward this trip.

Student Org. President/Treasurer Printed Name: _____

Student Org. President/Treasurer Signature: _____ Date: _____

STAFF ONLY:

By signing below, the Office of Student Life verifies that the student organization has the funds available in its account to be used for this purpose, or confirms that the student organization has already used the funds listed above for this purpose, and will provide the accurate SOA number.

Office of Student Life Staff Name: _____

Office of Student Life Staff Signature: _____ Date: _____

SOA#: _____

If applicable, I hereby certify that this trip is NOT affiliated with any registered student organization at

Purdue University Fort Wayne and will NOT receive funding from any such organization.

Student Printed Name: _____

Student Signature: _____ Date: _____

Please complete the sections below to demonstrate that your group has *explored* and *attempted* to utilize all other available funding sources prior to presenting your request to the Student Travel Fund Committee. Where signatures are requested, **written consent provided via email is also acceptable in lieu of a physical signature**. If submitting email consent, please attach the full email conversation showing the approval to this document.

Academic Department Financial Contribution: \$_____

Select the applicable expense categories for which funding will be used and provide the amount allocated to each selected category.

- ☐ Airfare: \$_____
- ☐ Ground Transportation: \$_____
- ☐ Lodging: \$_____
- ☐ Conference Registration: \$_____
- ☐ Other: _____ \$_____

Academic Department Name: _____

By signing below, I (Dean, Chair, or Academic Representative) verify that the information listed above is correct and will not change for this trip.

Dean, Chair, or Academic Representative Name: _____

Dean, Chair, or Academic PFW Email: _____

Dean, Chair, or Academic Representative Signature: _____ Date: _____

If applicable, I hereby certify that this trip is NOT affiliated with any academic department at Purdue University Fort Wayne and will NOT receive funding from any such department.

Student Printed Name: _____

Student Signature: _____ Date: _____

Please complete the sections below to demonstrate that your group has *explored* and *attempted* to utilize all other available funding sources prior to presenting your request to the Student Travel Fund Committee. Where signatures are requested, **written consent provided via email is also acceptable in lieu of a physical signature**. If submitting email consent, please attach the full email conversation showing the approval to this document.

External Scholarship/Grant: \$_____

Scholarship/Grant Title: _____

Please indicate the status of this scholarship or grant below and include the corresponding date.

- ☐ Applied on _____
- ☐ Waiting to hear back by: _____
- ☐ Denied Funding on _____
- ☐ Awarded Funding on _____

Select the applicable expense categories for which funding will be used and provide the amount allocated to each selected category.

- ☐ Airfare: \$_____
- ☐ Ground Transportation: \$_____
- ☐ Lodging: \$_____
- ☐ Conference Registration: \$_____
- ☐ Other: _____ \$_____

By signing below, I verify that the information provided above regarding external scholarships or grants is accurate, and I will keep the Student Travel Fund Committee informed of any updates or decisions for this trip.

Student Printed Name: _____

Student Signature: _____ Date: _____

If Applicable: I hereby certify that this trip has NOT applied for or received any external scholarships or grants. By signing below, I confirm that no additional external funding has been requested or secured for this travel.

Student Printed Name: _____

Student Signature: _____ **Date:** _____

Student Requestor Signature:

The signing of this form verifies that all of the information is accurate and correct. Completion of this form does not guarantee Student Travel funds, as funds are made available on a first-come-first served basis and are subject to approval of the Student Travel Fund Committee.

Student Requestor Printed Name: _____

Student Requestor Signature: _____ **Date:** _____

Student Travel Fund Committee Chair Signature:

The signature of the Student Travel Fund Committee Chair confirms that this documentation has been received and reviewed as part of the funding request process. This signature serves as verification of receipt only and does not indicate approval or guarantee of funding by the Student Travel Fund Committee. After review by the Chair, the request will be added to the Student Travel Fund Committee agenda for consideration, unless any concerns arise.

Student Travel Chair Signature: _____ **Date:** _____

Questions?

Email studenttravel@pfw.edu
or Visit Walb 210

Student Travel Fund Committee

Sponsored By:

