

IBA/LSAMP/Science Alliance Travel Assistance Application

STUDENT INFORMATION			
Name:			
Legal Name (if different):			
Current Address:	Current Cell Phone:		
CONFERENCE/CONVENTION INFORMATION			
Conference Name:			
Conference Web Site:			
Location:			
Dates of Event: (Please provides schedule)			
Presenting?			
If not presenting, please provide a letter of support from your PI. This would could be a brief statement explaining why this event would be beneficial to the student. These responses should be emailed to laura-kowalski-bliss@uiowa.edu			
REQUESTED FINANCIAL ASSISTANCE			
Expense	Requesting from IBA	Other Financial Assistance (other department, scholarship, awards, etc)	
Conference Registration			
Hotel			
Transportation			
Other			
SCHEDULING/TRANSPORTATION			
Expected departure date & preferred time of day			
Expected return date & preferred time of day			
Preferred Airport:			
TRAVEL ARRANGEMENTS AND LODGING			
If traveling with other students and would like to coordinate schedules– please provide their names and who will be making their travel arrangements. We will do our best to accommodate – but this is not guaranteed. Hotel costs split evenly between all guests.			
Student Name	Traveling with	Sharing Room	If known, provide staff person assisting with their travel
EXCUSE LETTER FOR PROFESSORS			
You are responsible for discussing this with your professors in advance and making arrangements for missed work.			
Course	Professor		Dates you will miss