

Graduate Research Mentorship Recipient Conference Travel Form

Up to \$500.00 is available, on a reimbursement basis, to travel to a professional conference to present a paper based on the research accomplished during your fellowship. To receive funds, complete this form and submit it to:

UCLA Graduate Fellowships Services
1252 Murphy Hall, Box 951419
Los Angeles, CA 90095-1419

All **Graduate Summer Research Mentorship recipients** must also submit to the Graduate Division a certificate of completion of the online UCLA Human Research Protection Program (<http://www.training.arc.ucla.edu/ucla>) to qualify for the travel reimbursement. Please select the Social & Behavioral Researchers and Staff required modules.

- Please attach the invitation or other relevant documentation confirming that you are presenting a paper at the conference.
- Review, sign, and submit a copy of the Graduate Division *General Conditions for Student Travel* form, available at www.gdnet.ucla.edu/asis/stusup/travelcndtns.pdf.
- You must submit original receipts and copies of proof of payment (e.g., bank or credit card statement) with this form. Please tape or paste receipts onto a separate 8 ½ by 11 page and include your name & UID number in the lower right-hand corner of the page.
- Note: Airline and hotel packages booked online cannot be reimbursed. If travel and lodging are booked separately, they are reimbursable.

You may apply for reimbursement any time during the academic year. The final deadline to apply for support is the **first Monday in June**.

Summer Research Mentorship

or

Academic Year Research Mentorship

Year Awarded: _____

Year Awarded: _____

Name: _____

Student UID: _____

Address: _____

Phone: _____

Email: _____

Department: _____

Title of Paper: _____

Name of Conference: _____

Location: _____

Dates: _____

<p>Budget</p> <p>Total travel costs may exceed \$500; however, the Graduate Division will reimburse only up to \$500.</p>	Travel Costs (Round Trip from Los Angeles)	\$ _____
	Conference Fees	\$ _____
	Hotel Room	\$ _____
	Meals	\$ _____
	Total	\$ _____

Student's Signature: _____

Date: _____