

**2024-2025 Application for Conference Funding Support
GSE Student Affairs Committee (GSAC)**

Name:

Are you a GSE-funded student?

Are you a Rutgers employee?

If you are not a Rutgers employee, please indicate the address where you would like your reimbursement sent:

Email:

GSE Program/Department:

Conference Title:

Conference Dates and Location:

Your Role in the Conference (e.g., paper presenter, symposium, participant, workshop leader, discussant, session chair, attendee):

Title of Presentation (if applicable):

Author(s)' Names:

Please describe any other type of support (e.g., faculty member's grant, Dean's conference support) you have applied for/anticipate receiving with regard to this conference. **(Please go to page 2, *Information for Pre-Trip Authorization Request*, to provide a more detailed breakdown of your estimated expenses.)**

Estimated Amount of Reimbursement Support Requested from GSAC:

Estimated Amount of Reimbursement Support from Dean's Support (if applicable):

Estimated Amount of Reimbursement from Faculty Grant (if applicable):

By signing below, I agree to notify GSAC of the decision regarding my conference proposal submission. I will provide GSAC with the official notification of my conference presentation acceptance or will notify GSAC that my conference proposal submission was not accepted so that GSAC can keep accurate records of my conference funding for the academic year.

IN ORDER TO BE REIMBURSED, YOU MUST SUBMIT YOUR EXPENSES WITH ALL REQUIRED RECEIPTS AND SUPPORTING MATERIALS BY THE DUE DATE PROVIDED BY GSAC. IF YOUR SUBMISSION IS INCOMPLETE OR YOU DO NOT SUBMIT BY THE DUE DATE, WE WILL NOT BE ABLE TO PROCESS YOUR REQUEST.

Student Signature _____ Date _____

Information for Pre-Trip Authorization Request

Name of Trip:

Trip Type (Domestic or International):

Travel Start Date (NOT Necessarily Conference Start Date):

Travel End Date (NOT Necessarily Conference End Date):

Main Destination City/State/Country:

Anticipated Departure Time on Travel Start Date (please indicate am or pm):

Anticipated Departure Time on Travel End Date (please indicate am or pm):

Preferred Airport for Departure (e.g., Newark, JFK, LaGuardia):

Will there be any personal travel? (If yes, please indicate dates of personal travel):

Main Funding Source:

Other Funding Sources (if applicable):

Expected Expenses - Please provide an itemized list of the expenses that you anticipated, the estimated cost of each expense, and the funding source covering each expense. NOTE: If you would like to be reimbursed for per diem meal expenses, please indicate that here (provide dates and meals for which you are requesting reimbursement).