## DEPARTMENT OF ENGLISH GRADUATE STUDENT TRAVEL REQUEST

Please complete all information and submit to the Graduate Program Coordinator at least a week before you leave. Approval must be received prior to your departure.

		DATE:
Name:	UofSC ID:	
Purpose of Travel:		
Giving Lecture	Reading Paper	
Charing Session	Other	
Title of Work:		
Name of Conference:		
City:	State:	-
Check here if you have applied for	a Graduate School Travel Gra	nt for this travel
Check here if you have already red	ceived a Graduate School Trav	el Grant this academic year
Date Leaving:	Date Returning:	
Via: Plane	Train Po	ersonal Vehicle:
Estimated Costs	Estimated Amount	Approved Amount
Transportation Plane or Train round trip		
Personal Vehicle Round trip mileage	x 0.515	
Per Diem Lodging		
\$50 per day for meals		
Registration, Parking, local transpo	ortation	
Total Requested		