**TCNJ Department of Special Education, Language, and Literacy**

**Student Travel Funds Application**

1. Student's Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PAWS ID #\_\_\_\_\_\_\_\_\_\_
2. Faculty sponsor(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Title of Event \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Dates and Location \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Have you applied for and been approved for SELL travel funds already this year?

(Check One) 🞏 YES 🞏 NO If so, when and how much? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Other funding source sought (indicate the source, amount and status of request, e.g. SGA, College travel funds, student organization funds, other academic department funds):

|  |  |  |
| --- | --- | --- |
| **Source** | **Amount** | **Status** |
|  |  |  |
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1. Indicate your status as of the time of this application:

Freshman\_\_\_ Sophomore\_\_\_ Junior\_\_\_ Senior\_\_\_ Graduate Student\_\_\_

1. Type of Event (circle one and write a 3-5 sentence description of your anticipated participation):
	1. Paper or poster presentation at scholarly conference
	2. Professional development conference
	3. Awards presentation
	4. Workshop
	5. Other (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Description:

1. Total amount requested: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List each item and its related expense (e.g. hotel, train, meals, registration fees, etc.) in the space provided. Please note that the maximum amount of funding that the Department of Special Education, Language, & Literacy provides is $400 per student.

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| --- | --- |
| Item | Expense |
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| --- |
| *For Internal Use Only*Funded: Yes \_\_\_\_\_\_ No \_\_\_\_\_\_\_\_ Amount Funded: \_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Department Chair: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |