

Doctoral Travel Funding Application Form
Management Information Systems
The University of Arizona

Please complete the following and submit electronically to MIS Doctoral Program Chair – Dr. Sue Brown at suebrown@eller.arizona.edu

Name _____

Advisor _____

Year in program _____

Event _____

Event dates _____

Your role in the event _____

Statement (include why you want to attend the conference – being specific about its role in your professional development; include an abstract of paper to be presented, if one).

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Travel Budget

1. Airfare	\$ _____
2. Hotel calculations & information How many nights? _____ Rate per night? \$ _____ What is the lowest conference rate per night? \$ _____ NOTE: Department will pay up to ½ of the lowest conference rate and will consider only room sharing options	Hotel Total Input the hotel total (nights times rate per night) below \$ _____
3. Car/Local transportation/Parking Please describe further:	\$ _____
4. Conference registration	\$ _____
5. Other fees, if applicable (e.g., annual membership fees; workshop fee) Please describe further:	\$ _____
Total travel budget	\$ _____
Amount requested/received from GPSC Date of application _____ Amount requested/received \$ _____ Decision/Status - choose one – “Funded” “Rejected” “In process” _____ (If none, provide documentation of previous award via email to Dr. Brown)	\$ _____

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Net Request (Total travel budget minus GPSC amount)	\$ _____
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For Departmental use only

Departmental Approved Amount \$ _____

Departmental Approval Signature _____