



IUPUI

SCHOOL OF INFORMATICS AND COMPUTING

DEPARTMENT OF HUMAN-CENTERED COMPUTING
Indiana University-Purdue University
Indianapolis

Approval for Ph.D. Student Research Conference Travel / Professional Development

Each HCC Ph.D. student enrolled in 6 credit hours or more each semester will be provided with a \$2,500 account for travel during his/her entire program (not per year), of which no more than \$1,000 may be spent during the first two years of his/her program. This money is to be used to attend one or more research conferences at which the student is presenting a peer-reviewed, authored research paper/poster prepared in the context of the student's academic studies. The funding may be used to cover for travel, hotel, food, and/or registration fees. IU travel policies apply. Items such as alcohol, entertainment, etc. are not covered. The student is expected to pay the difference, if any. Once approved, students are responsible for their own travel arrangements, hotel, food, registrations, and/or printing. All receipts must be submitted to the School (nfish@iupui.edu) immediately after the travel.

Note: This form must be authorized by the Department Chair before the conference and any funds are spent. No exceptions.

Student Name: Program: Enrollment Period (Sem):

Enrolled during requested travel: YES NO Conference Name:

Conference Date(s):

Conference Location:

Travel Date(s):

Are you an author of a research paper or poster to be presented at the conference? YES NO

If yes, what is the title of the research paper or poster?

Attachments: copy of the accepted paper; copy of the reviews and notification of acceptance.

Please estimate the expenditures for this trip:

Table with 2 columns: Amount, Explanation. Includes rows for \$ amounts and a Total row with a note: Total (no more than \$1,000 may be spent during the first two years of the program)

1 http://www.indiana.edu/~travel/policies/policies.shtml

Brief narrative explaining the nature of this travel request:

Signature of the Student Requesting Support 10-digit ID Date

Signature of the Faculty Most Familiar with the student's work (Research Advisor or Instructor) Date

Authorization:

Department Chair Total Amount Approved** Date

Please submit this signed form to Nancy Barker (nfish@iupui.edu).

**This travel support is subject to all applicable IU policies and procedures as may exist from time to time regarding the maximum dollar amount allowed as scholarship and student employment status, and justification provided for the travel.