



**STUDENT TRAVEL GRANT APPLICATION  
2009-10**

Name: \_\_\_\_\_ Phone #/e-mail address: \_\_\_\_\_

Meeting you wish to attend: \_\_\_\_\_

Location: \_\_\_\_\_ Dates of Travel: \_\_\_\_\_

Official Participation: \_\_\_\_\_

Title of Paper: \_\_\_\_\_

Are you first author on the paper or poster? \_\_\_\_\_

Sponsoring Professor (and affiliation if not Pomona College): \_\_\_\_\_

Will your sponsoring professor be attending the conference? \_\_\_\_\_

Travel costs (Round-trip airfare between major airports):

Lowest available fare: \$ \_\_\_\_\_ Restrictions: \_\_\_\_\_

Registration \$ \_\_\_\_\_ Hotel, Ground, Meals: \_\_\_\_\_

Total cost \$ \_\_\_\_\_ Total requested \$ \_\_\_\_\_

Briefly describe the purpose and value of your attendance at this meeting:

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Sponsoring Professor Approval  
(or chair of department, if not Pomona College)

**PLEASE RETURN TO ASSOCIATE DEAN CYNTHIA SELASSIE  
ALEXANDER 226, POMONA COLLEGE**