

TRAVEL FELLOWSHIP FUNDING APPLICATION

Instructions on https://grad.msu.edu/travel. Completed forms should be emailed to the Graduate School at grad.msu.edu. Please note: this funding is in the form of a fellowship.

Date:	<u>-</u>						
US. Citizen	Yes	No		Current Graduate	Doct	oral	
Permanent Resident	Yes	No	P	Program Enrollment:	N	Naster's Professional	
International Student	Yes	No				Medical/Law	
If no, Country of Origin				urrent Graduate GPA	١		
Ethnicity (optional)			,	nave federal financial aid, ple It what the impact that this a			
Student Name:				Last 4 digit	s of PID:		
Mailing Address:							
Phone:			Email:				
Department and/or Prog	ram:			College:			
l certify that the above st	udent is ma	king satisj	factory progre	ss towards a graduat	e degree.		
			_		<u> </u>		
	Major Professor			nature of Major Professor		Date (mm/dd/yyyy)	
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SHARED FUNDING All A signature is required below support this request. Individual Funding Provider Major Professor Department / Program / Unit College International Studies & Programs For international conferences thele103@msu.edu. Funding Other	from the majoral department Name and address s only. Endorse from ISP will b	ement from the form	T; the department may request additional signature Signature USP at 209 internal m of a travel reim	tional Center or	en if no fund he applicant ENSES 1 nt # 2 3 4 5 nip. 6	s are committed to s. Amount from	

_____ Disapproved:___

Amount Approved:____