

**Template for CTRG Conference Travel Grant Request**

**Conference Travel ID** [To be filled by Office of Research-NSU]:

*[Note: This form should be completed and submitted after the conference presentation is completed.]*

**Application Date:**

**Name of Faculty Member**: **Faculty Initial**:

**Designation**: **Department**:

**Conference Date:**

**1. Conference Details:**

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**2. Country of Travel:**

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**3. Requested Amount:**

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| --- | --- |
| Registration fee: | Travel costs: |
| Accommodation charges: | Other costs: |

**4. Status of the Participation\*:** ☐ Paper Presentation ☐ Keynote Speaker

**5. First time applicant:**  Yes  No

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| **6. The applicant has already received a conference travel grant in the current fiscal year (July 2024 through June 2025):**  Yes  No | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of the applicant with date |

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| **7. Department Chairperson confirms paper was presented in local venue before application to CTRGC**:  Yes  No  **7(a). Date and Venue of local presentation\*\***: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Department Chair with date |

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| **8. Recommendation from Dean:**  Recommended  Not Recommended | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Dean with date |

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| **9. Recommendation from Director, Office of Research-NSU:**  Recommended  Not Recommended | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Director, OR with date |

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