The Annenberg School for Communication  
University of Pennsylvania

Form 9 Travel & Research Approval

You should complete this form and get an approval signature from your advisor and the Assistant Dean of Graduate Studies as soon as you know that you have had a competitively selected paper accepted at a convention/conference or have legitimate educational and research project expenses. For a legitimate educational and research purposes, please attach your project outline and anticipated budget.

Upon completion of your trip or project, please complete pages 2 of this form, attach the necessary receipts, and submit it to the Business Office within ten days using Concur. It is expected that you will track the amount of money remaining in your travel & research budget for the year and note it on the form.

Name of Student ____________________________________________________________

Title of Paper/Project/Item ___________________________________________________

Conference Name or Item Description _________________________________________

Location of Conference _____________________________________________________

Date of Expense ___________________________________________________________

Have you previously delivered a version of this paper at another conference? (Yes) (No)  
If yes, please explain the additional value you anticipate from attending this conference_________________________________________________________________

Students traveling internationally must use the Global Activities Registry http://global.upenn.edu/gar Pen’s central resource for collecting information about the travel plans and activities of faculty, staff, and students preparing to travel abroad for academic, educational, clinical, research, or University business purposes. This secured information is used

- to contact travelers in emergencies
- to assist individuals and groups, as needed, with pre-travel preparations
- to identify opportunities for closer collaboration on international research and operations

Advisor (Print)_________________________  Advisor Approval Signature_______________________ Date_____

Assist. Dean (Print)_____________________  Assist. Dean Approval Signature_________________ Date_____
Reimbursement will be made for the lowest possible airfare, train fare, or mileage, and if student’s annual travel budget permits, for room and tax changes for hotel accommodation. Submit original receipts (see below) to the Business Administrator within 10 days of the conclusion of the trip.

In order to be eligible for assistance with travel expenses, a student must be in good standing, enrolled for credit courses, and be receiving either financial support of a Dissertation Research Fellowship.

Insurance costs for rental cars will NOT be reimbursed, as they are covered under the University’s self-insurance plan. You must attend the University’s Drivers Safety Program to be eligible for this coverage. If you have not, the University will not be responsible should an accident occur, nor will the University reimburse you for the cost of insurance.

By signing below, I certify that the expenditures submitted were incurred by me while on official business in the city or cities indicated above. Further, this form certifies that I was insured for at least the statutory minimum for bodily injury and property damage for any automobile rental charges for which I seek reimbursement.

Total Value of Original Receipts $______________________________________

Total remaining in travel budget after these expenses are reimbursed: __________________________

If the dissertation budget is being charged indicate balance here:_____________________________  

If this expense is being charged to a budget other than your personal travel/research budget or dissertation budget please indicate the name of the other funding source below and attach any approval documentation with the receipts.

Name of Student ____________________________________________________________

__________________________________________________    ______________________
Signature of Student                                                  Date