



ECST Student Travel Award (Individual Application)

This form is used for individual student to apply for travel support for conference presentation, publication or professional development. For group travel to professional conferences or project competition, please use the group application form.

Personal Information:

Undergraduate Student

Graduate Student

Name _____ CIN# _____
Last First

Address _____
Street City State ZIP

Cal State L.A. Email (required) _____ Telephone _____

Major: _____ Expected date of Graduation _____
Semester / Year

GPA: _____ Degree Expected: _____

Purpose of Travel

Publication/Presentation

Professional Development

Other (please specify) _____

Conference Information:

Name of Conference: _____

Location of Conference: _____

Travel Dates: _____

Please note that if you have already received an ECST Travel Award for this academic year, you are not eligible to receive this award.

List any other funding resources _____

Estimate of Expenses (Please include **printed** estimates from vendors you will likely use)

Item	Cost, w/tax if applicable
Registration Fee:	
Transportation:	
Lodging (\$250 maximum room rate per night):	
Other: (e.g. public transportation, other, etc.)	
Total Expenses:	
Total Amount Awarded*:	

* The Travel Award will cover up to 80% with a maximum of \$750 of the cost.



Please Attach the Following to the Application

- For **Publication/Presentation** in a conference, please submit an abstract of your paper or presentation
- For attending conference for **Professional Development**, please submit a statement of purpose as described below.

**For Individual Travel Award, priority will be given to support publication/presentation for undergraduate students.*

Statement of Purpose

One paragraph statement from the applicant summarizing the professional development activities planned (e.g., conferences sessions, seminars) and indicate the importance of the professional development travel to his/her educational and career objectives. The essay should conclude with a statement of need for financial support (please list funds available from other sources).

By signing below, you and your faculty/staff advisor acknowledge that:

1. The applicant is attending a conference for presentation/publication in his/her discipline of study; or the application is attending a conference for professional development that benefit his/her career.
2. The other funds through Cal State L.A. (State or UAS) to support travel for the same conference is accurate.
3. The **Statement of Purpose, and Cost Estimates** have been reviewed and approved by the faculty advisor.
4. The applicant is registered as a full time student (full time status) at Cal State L.A.
5. The applicant has not previously received support from ECST this academic year.
- 6 At the end of the conference, the student will complete a survey.

Student _____
Print

Signature

Date

Advisor _____
Print

Signature

Date

Submit all documents to:
ECST Student Success Center,
E&T A125 or email T Fox at
tfox2@calstatela.edu.

**For questions and more
Information call 323-343-4526**