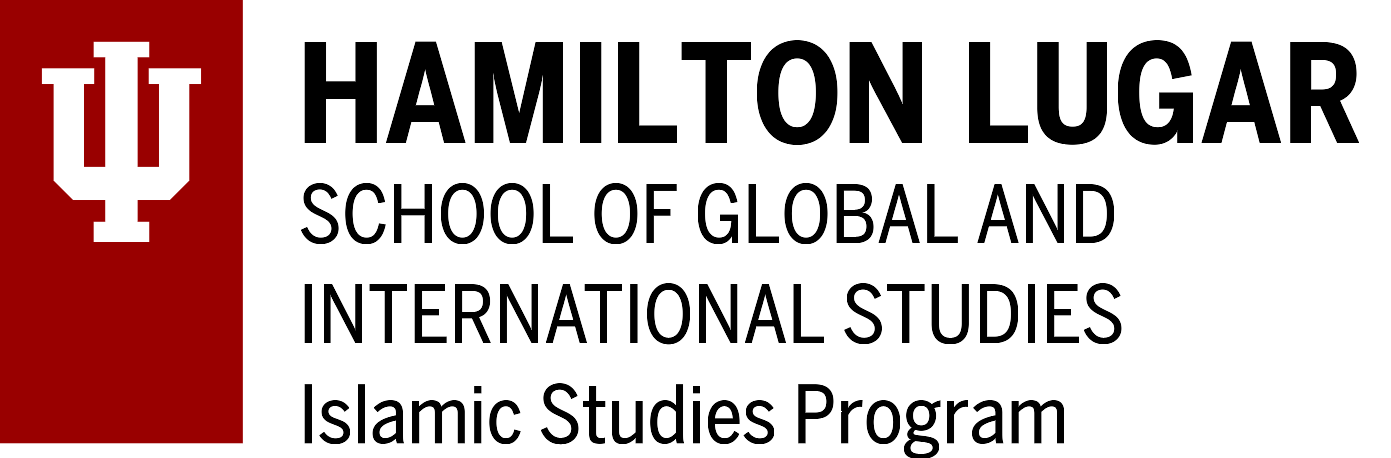
**Travel Award for IU Graduate Students**

**Deadline:** March 18, 2020 for the period March 18, 2020—July 31, 2020

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Advisor’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dept., Degree, Year (e.g., NELC, PhD, 3): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Previously awarded an Islamic Studies Program Travel Award? (Yes or No)

What other units have you applied to for funding for this purpose: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has any unit committed to funding your travel? (Yes or No)

If "Yes" list unit and award amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROJECT DETAILS**

1. If traveling to a conference:

* Conference name, location & dates; your panel & paper title:

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| --- |
|  |

* Budget:

|  |  |
| --- | --- |
| Registration fee: | Hotel cost per night/number of nights: |
| Transportation cost & means: | Per Diem/Food: |
| Shuttle: | Total Cost of Trip: |
| Additional costs: |  |

* Supporting materials: Please submit with this application an Abstract of your paper and, if applicable, a letter from conference organizers confirming acceptance of paper.

1. If traveling for field work:

* Location, Dates, and purpose of field work:

|  |
| --- |
|  |

* Budget:

|  |  |
| --- | --- |
| Registration fee: | Hotel cost per night/number of nights: |
| Transportation cost & means: | Per Diem/Food: |
| Shuttle: | Total Cost of Trip: |
| Additional costs: |  |

* Supporting materials: Please submit with the application applicable evidence for field work (e.g., letters of invitation; advisor’s statement, etc.).

The Islamic Studies Program requests that you acknowledge our support in any product of your research, if applicable.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Applicant’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(an electronic signature is valid)