Reves Faculty International Conference Travel Grants

General Information:

1. First Name: *

2. Last Name: *

3. Banner ID (930 #): *

4. Phone Number: *

5. Email: *

6. Department/Program/School: *

7. Date of Appointment to the College: *

8. Type of Appointment: *

○ Tenured

○ Tenure-Eligible

○ Non Tenure-Eligible

○ Visiting

9. Conference Name: *

[   ]

10. Conference Location: *

[   ]

11. Conference Date: *

[🗓]

12. Title of Conference Paper: *

Provide translation if not in English.

[   ]

13. Please include an abstract that is accessible to non-specialists, and be clear about the benefits of the conference for both your own work and for international studies at the university. *

[   ]

Estimated Travel Costs:

14. Transportation:

15. Lodging:

16. Subsistence:

17. Other Expenses:
Please explain.

18. Total Cost: *

19. Other funds requested or secured: *
Please name sources and provide amounts.

20. Amount requested from Reves Center: *
$500 maximum for international travel. $400 maximum for domestic travel.

21. Please email a copy of your conference acceptance notice to Dianne Alleman at dralleman@wm.edu

Contact information for the fiscal administrator in your department:

22. Name: *

23. Email: *

24. Phone Number: *

Verification

Please check the box for return receipt to verify we have received your submission. Or please email dralleman@wm.edu to confirm she has received it. Thank you!