

Department of Statistics – Request for Graduate Student Travel Support Utilizing Koch Funds

Student Name: _____ OSU Email: _____

Name and Place of Conference/Workshop: _____

Dates of Conference/Workshop: _____ Dates of Travel: _____

Form of Conference/Workshop Participation: _____

Circle Option Used: (A) Matching Funds (B) No Matching Funds

Koch Travel Award Amount Requested (**maximum \$750**): _____

Expected Budget Expenses: (Airfare, Mileage, Lodging, Per Diem Meals, Registration Fees, etc.)
for the Conference/Workshop:

Information on Matching Funds for Option A above:

Name of GRA Supervisor/Dissertation Advisor: _____

Amount of Travel Support from Independent Source: _____

Source of Independent Travel Support: _____

Graduate Student Signature: _____ Date: _____

Faculty Advisor Signature: _____ Date: _____

Statistics Chairperson: _____ Date: _____

Cost Center Fund Gift Project Program Balancing Unit Assignee
(For Office Use Only)

Effective April 4, 2023 until further notification of change.