## **UNIVERSITY of HOUSTON**

## OFFICE OF THE PROVOST

Graduate School

## **Cullen Fellowship Travel Grant**

Student Information		Classification: Masters PHD Professional	
Last (please complete above)	First M	.l.	Cumulative Graduate GPA:  Previous Recipient?  Yes No
Student ID	Email Address	_	If yes, what date?
Conference Information			Conference Location:  National International Local/ Regional  Type of Presentation:
Name of Conference		_	Oral Presentation Poster Presentation  Submission Type:
Title of Presentation			General Acceptance Invited Peer-Reviewed
Location of Conference			Conference Start and End Date:
Itemized Budget  Airfare: Lodging: Ground Transportation (Gas, Rental Car, Taxi): Mileage: Meals & Tips: Conference & Seminar Fees: Miscellanous: TOTAL:  Graduate School Use Only:	Materials and Signature  Curriculum Vitae Abstract Written Description of Event Support Letter Document Confirmation  Your signature below indicates acceptance of the guidelines found on the Graduate School website and verifies that all the information is complete and accurate. Incomplete applications will not be considered for funding.	said 25% Dep Dep Dep Dep Dep Dep Date	Department Approval igning this form, the department agrees to fund student from the provided cost center to meet the minimum requirement of the total projected costs.  partment:  tt. Amount: \$
Application Received:  Award Amount:  UHGS Signature:	Applicant's signature	Cer	tifier Signature:
UHGS Name:	Date (mm/dd/yy)	Date	e: