



## Student Travel Information Form

### Student Participants

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**Destination:**

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**Purpose:**

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**Date of Departure:**

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**Time of Departure:**

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**Date of Return to Campus:**

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**Time of Return to Campus:**

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**Mode of Travel:**

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**Funding Source(s): *(if any)***

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*If necessary, attach a separate list of additional names.*

Name of Sponsoring Faculty Member (Please Print or Type)

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Signature of Sponsoring Faculty Member/DATE

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Signature of Department Chair/DATE

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Signature of Dean/DATE

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