

**INDIANA UNIVERSITY  
JACOBS SCHOOL OF MUSIC  
REQUEST FOR TRAVEL FUNDING**

Revised December 2021

Please read the Travel Policies and Procedures before completing this form. Print legibly or type. Submit this form, along with any supporting documentation such as letters of invitation, conference descriptions, programs, etc., to the Travel Committee Chair. Do not submit receipts with this form.

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**PERSONAL INFORMATION**

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Name\_\_\_\_\_

Department\_\_\_\_\_

Campus Phone\_\_\_\_\_

Email\_\_\_\_\_

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**DESCRIPTION OF EVENT**

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Name of Event \_\_\_\_\_

City/State/Country of Event \_\_\_\_\_

Dates of Event \_\_\_\_\_ Dates of Travel \_\_\_\_\_

Describe the event, your role (performer, presenter, session chair, participant, attendee, etc.), and provide a brief description of the importance of the event toward your professional development.

List any additional funding support you have sought or are receiving, including stipends, support from the Overseas Conference Fund, etc.

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**COST ESTIMATE**

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Place an asterisk (\*) by any amount that is already known or fixed, such as hotel room costs, airline tickets already reserved, registration fee, etc. **NOTE:** All quantities should be given in **US dollars**. Mileage reimbursement rates are subject to change. Current rates can be seen on the IU Travel Management Services website.

**Transportation:**

Airfare (name of carrier: \_\_\_\_\_) \$ \_\_\_\_\_  
\_\_\_\_\_ miles at \$0.56 per mile (first 500 miles) \$ \_\_\_\_\_  
\_\_\_\_\_ miles at \$0.28 per mile (for miles 501+) \$ \_\_\_\_\_  
Other (specify: \_\_\_\_\_) \$ \_\_\_\_\_  
Total transportation \$ \_\_\_\_\_

**Lodging:**

Name of hotel \_\_\_\_\_  
Number of nights \_\_\_\_\_ Cost per night \$ \_\_\_\_\_ Total lodging \$ \_\_\_\_\_

**Miscellaneous:**

Registration fee \$ \_\_\_\_\_  
Other (specify: \_\_\_\_\_) \$ \_\_\_\_\_  
Total miscellaneous \$ \_\_\_\_\_

**Total Requested** \$ \_\_\_\_\_

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**FUNDING FROM OTHER SOURCES**

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This section must be completed by faculty and staff who will be using funds from sources other than the School of Music Travel Fund. This would include grants, research accounts, stipends, sponsors, etc.

**IU Accounts:**

Account	Limit	Sub-Account	Object Code	Sub-Object Code	Acct. Mgr. Sign
_____	\$ _____	_____	_____	_____	_____
_____	\$ _____	_____	_____	_____	_____

**Outside Funding:**

Source	Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____
<b>Total other funding</b>	<b>\$ _____</b>

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**SIGNATURE**

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Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

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**COMMITTEE USE ONLY**

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Date received _____	Total amount approved \$ _____
Date considered _____	Total amount disbursed \$ _____
Recommendation: ____ approve _____ partial support ____ deny	Comments _____

Travel committee chair \_\_\_\_\_