ALL REIMBURSEMENTS REQUIRE PROOF-OF-PAYMENT.

You may access up to $300 for each year that you are on the grant.

Travel funds are primarily used to send a trainee/student to a professional conference to present their original research to colleagues.

After being accepted as a trainee, the request to release the conference funds consists of 3 parts:

a) Conference Funds Release Form: Complete and return this form to the MCB Program at mcb@uw.edu.

b) Have your PI/advisor complete the PI/Advisor Statement Supporting CMBTG Funds Use form, then attach it.

c) Reimbursements will be made when receipts or proof of payments have been submitted. If you have questions about travel, contact MCB’s Program Manager, Denise Barnes (barnem@uw.edu).

AFTER THE TRIP REIMBURSEMENTS are for expenses you purchased out-of-pocket for which you will want to be reimbursed. Those expenses are usually for payments for non-sponsored lodging, airport/airplane meal costs, modest baggage fees, taxis, shuttles, etc. Receipts are required. Reimbursements will not be processed until all travel expense reimbursement forms and documents have been submitted.
Cell & Molecular Biology Training Grant Travel Request

Conference Funds Release Form

Student Name: ____________________________________________
Email: ____________________________________________ Phone: ____________
Department/Advisor: ____________________________________________ Mail Stop: ____________
Status: ☐ Pre-Candidate ☐ Ph.D. Candidate For trip, using two or more grants: ☐ Yes ☐ No
Date Entered Graduate School: __________________ Name of Second Grant: __________________
I intend to present a research paper or a poster at this conference: ☐ Yes ☐ No

Meeting Title: __________________
Organization: ____________________________________________
Conference Location: __________________ Conference Start & End Dates: __________________
City, State OR City, Country Month/Days/Year
Travel Dates: Depart from Seattle: __________________ Return to Seattle: __________________
Date & Time Date & Time
Personal Time and Dates: __________________

CMBTG Funds: $ __________________
Estimated Costs: $ __________________
☐ Conference: $ __________________
☐ Membership: $ __________________
☐ Paper/Poster: $ __________________
☐ Airfare: $ __________________
☐ Shuttle/Taxi: $ __________________
☐ Food (per day): $ __________________
☐ Hotel: $ __________________
☐ Other: $ __________________

For MCB Office Use Only:

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Applicant’s Signature ____________________________________________ Date __________________

Z:\Forms and templates CMBTGTravelRequest
Updated 12/07/2018
A request to use CMB Training Grant funds is not complete until MCB has received both the trainee/student’s fund release form and the PI/advisor’s statement.

Trainee/Student’s Name: ________________________________

Statement of support for request of travel funds:

PI/Advisor’s Signature ________________________________ Date: ____________________