**COE Student Org Travel Request**

**Q1** Name of department student organization (DSO), person submitting the form, and KSU email; DSO advisor name and email

- Name of department student organization (DSO)
- Name of DSO primary student contact completing this form
- Title/role of DSO primary student contact completing this form
- KSU email of DSO primary student contact completing this form
- DSO advisor name
- DSO advisor KSU email
- Sponsoring Department/Unit

**Q11** Please provide the following information

- Destination (City, State)
- Date of departure (DD/MM)
- Date of return (DD/MM)

**Q12** Briefly describe the purpose of the travel. For example: To participate as a K-State student team in the Widget Design Regional Competition; OR, To participate as DSO student representatives at the SHPE national conference; etc.

**Q13** Please identify each DSO student representative that will participate in this travel. List the student name, KSU email, KSU Student ID, and academic department. For example: Tristan Smith, txsmith8245@ksu.edu, 888200134, CHE. If there are more than 10 student travelers, please provide a separate list. If you do not know all travelers at this time, make your best guess.

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Please provide other known revenue/income values for this travel. Enter numbers to the nearest dollar. Do not include a dollar sign. For example, $2356 as 2356.

- Foundation account balance
- DSO account balance
- Requested SGA/CSI support for this travel
- Approved SGA/CSI support for this travel
- 1st Department/unit commitment [Note, this requires prior approval from the department/unit head/director]
- 2nd Department/unit commitment [Note, this requires prior approval from the department/unit head/director]
- 3rd Department/unit commitment [Note, this requires prior approval from the department/unit head/director]
- Other support (explain below)

If your organization has any "other" financial support for this travel, please explain below:

Please provide known/estimated expense values for the following travel related categories. Enter numbers to the nearest dollar. Do not include a dollar sign. For example, $2356 as 2356.

- Total Airfare for all persons
- Motor pool vehicle cost(s), if any
- Rental vehicle costs, if any
- Shuttle and/or Taxi costs (est)
- Parking costs, if any
- Lodging expenses
- Registration charges for all persons
- Other expenses (explain below)

Please provide the amount ($) of your requested financial support from the college. Approved college allocations will vary from year to year due to available funds and numbers of requests.

Please review the list below and click on each that you agree with before you submit the form.

- I agree that the submitted information is accurate to the best of my knowledge.
- I have reviewed this budget with the DSO advisor and they approve.
- I have a formal agreement of support as identified above from the respective DSO department/unit head/leader.
- Our DSO has requested funding from the K-State SGA/CSI office.

End of Survey