Travel & Conference Planning & Approval Form - Student

Name __________________________ Date ____________
Your Login __________ Mobile Phone: ____________ Other Contact No. ____________

Purpose of Travel / Name of Conference: (Attach Conference details, programme and any emails)
___________________________________________________________

Name and Address of Organisation/Building/Conference Centre you are visiting:
___________________________________________________________

Travel Arrangements:
Departure From: __________________________ Date: __________________________
Return From: __________________________ Date: __________________________
Land transport: ______________________________________________________________________
Accommodation: ______________________________________________________________________

Conference Participation (Circle)
Paper Joint Paper Poster
TITLE __________________________
___________________________________________________________
___________________________________________________________
___________________________________________________________
Other __________________________
___________________________________________________________

Source of Funds: (Circle)
Department Research Consultancy
Other __________________________

Costs: (NZ $) EST ACTUAL
Travel: $ ______ $ ______
Accommodation: $ ______ $ ______
Meals: $ ______ $ ______
Transport: $ ______ $ ______
Registration: $ ______ $ ______
Other (e.g Visa) $ ______ $ ______
TOTAL: $ ______ $ ______

PhD Student Supervisor: __________________________ Date: ____________

Activity Code Travel Conference Analysis Code Project Code
33600 Dept 5162 5170
33670 Consultancy 5162 5170
33695 Research 5162 5170

Comments:

Approval: Head of Department: __________________________ Date: ____________

Bookings Completed: __________________________ Date: ____________

Amount of Funding Approved: __________________________ Date: ____________