## **NEW COLLEGE**

## **Student Request for Research & Travel Funds**

Please complete the following form and return to New College Director by at least four (4) weeks prior to travel.

Name:			CWID:	
Email:				
Destination:				
Travel Dates: De	epart	Return		]
Reason for Trip:				
Contribution to I	New College Depth Study:			
Itania d Budgat				
Itemized Budget Travel	Lodging	Research Materials	Other*	TOTAL
*Describe Other				
Expense:				
	from New College Advisor:			_
(*Email from Advisor to	Director will suffice as well)			
Approved:	Denied:			
gnature:			Date:	
Director New Co	llogo			