

## Research Travel Support Application

Name:

Department:

Position:

E-mail:

Name of facility:

Facility location:

Departure date:

Return Date:

Requested by: \_\_\_\_\_  
Traveler's Signature

Date: \_\_\_\_\_

Approved by: \_\_\_\_\_  
Dean's Office

Date: \_\_\_\_\_

Please print this form, attach a description of the research, description of the facility, and letter of invitation, and send to Associate Dean Lori Martin either as a hard copy to 132B Hodges Hall or as an email attachment to [lorim@lsu.edu](mailto:lorim@lsu.edu).